CHAPTER VI

INSTITUTIONS AND ORGANISATIONS FOR THE DISABLED: AN EVALUATION

Rehabilitation of the disabled usually includes the following types of services:\(^1\)

(a) Early detection, diagnosis and intervention;
(b) Medical care and treatment
(c) Social, psychological and other types of counseling and assistance;
(d) Training in self-care activities, including mobility, communication and daily living skills, with special provisions as needed e.g., for the hearing impaired, the visually impaired, the orthopedically handicapped and the mentally retarded;
(e) Provision of technical after mobility aids, and other devices
(f) Vocational rehabilitation services (including vocational guidance), Vocational training, placement in open or sheltered employment;
(g) Follow-up

Rehabilitation services are aimed at facilitating the participation of disabled persons in regular community services and activities. These services are often provided by specialized institutions. "Rehabilitation should take place in the natural environment, supported by community based services and specialized institutions. Specialized institutions, where they are necessary, should be organized so as to ensure an early and lasting integration of disabled persons into society."\(^2\)

In India, work for the welfare of the physically handicapped started with isolated efforts and in sporadic way on the part of the Christian missionaries and other philanthropic societies. In case of the blind, the first organized effort was made in 1887

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\(^2\) The words within quotes are nothing but a measure suggested in the World Programme of Action, at p. 5.
with the establishment of Miss Sharp School for the blind at Amritsar which was subsequently shifted to Dehra Dun. The Bombay Institution for the Deaf and Dumb was the first to be established in 1884. However, for the orthopedically handicapped persons, the first organized artificial limb centre was started after World War II, in 1944 at Pune, initially for the benefit of servicemen but made open to civilians in 1951.

These sporadic efforts, however, were instrumental for mobilizing public opinion in various states in support of relief and rehabilitation measures for physically handicapped persons. It was on the basis of this spade work that a number of institutions/organizations in the service of all the categories of physically handicapped were started in India after independence. Welfare work for the disabled has, until quite recent years, been left entirely to voluntary organizations. The magnitude of the task made it clear that voluntary effort alone could not provide the quality and quantity of services needed for the gigantic task of the welfare and rehabilitation of the handicapped. Thus began the close partnership between the government agencies and the voluntary agencies with schemes of grants-in-aid to the institutions/organizations working for the welfare of the disabled.

Most of the voluntary organizations registered under the Societies Registration Act of 1860, offer specialized services for all the categories of the disabled persons. Apart from the voluntary organizations, most of them catering services at the regional level, there are some national Institutes also for each of the categories of disabled for the supply of aids and appliances to make them mobile, their education, training, vocational guidance, counseling, rehabilitation, research and training in various areas of disability. More than 2000 institutions/organizations are working for the welfare of the disabled in India. Since it is not possible to catalogue and evaluate the working of all

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the institutions, effort has been made to take up in detail the leading institutions working for the welfare of the disabled at the national level.

6.1. Institutions for the Visually Handicapped

(a) National Institute for the Visually Handicapped (NIVH), Dehradun

As early as 1943, an organization known as St. Dunstan's Hostel for the Indian War-blinded was set up in Dehradun. The main purpose of this organization was to offer training facilities to soldiers, sailors, and airmen blinded in the Second World War. With effect from 1 January 1950, the Ministry of Education took over the training centre of St. Dunstan's and renamed it Training Centre for the Adult Blind. Subsequently, the concept of a national centre for the blind was evolved. Several other units such as the Central Braille Press, the Women's Wing, the Model School for the Blind Children, and the like were added over the years.7

In 1973, the Government of India appointed a group of experts to review the role and functions of the center and to recommend its future pattern of functioning. The group recommended that the centre should become a research institute meant primarily for conducting research and training personnel. It should only undertake the provision of national-level services. The major recommendations of the group were accepted by the government. Accordingly, the centre became the National Institute for the Visually Handicapped with effect from 2 July 1979.8

The main functions of the Institute are to promote research, to undertake the training of personnel, and to deliver national level services. The Institute operates schools both for the blind and sighted children. It manages a workshop and engages in the production of certain appliances to be supplied to Bangladesh, and conducts training courses sponsored by the UNICEF. The Institute has taken a new scheme in pursuance of its basic objective of promoting research, to offer fellowships to individuals wishing to undertake research in areas related to blindness or visual impairment. Apart from this, the institute has taken several measures to better equip its

services. As a step in this direction 50 Braille Writers have been obtained from the United States. The UNICEF has agreed to supply Kurzeil, a machine which reads out printed materials to the blind. The UNICEF has also agreed to supply some speaking calculators. A scheme has been prepared to obtain from the UNESCO equipments for teaching mathematics to the blind. The UNESCO has also been requested to supply about a dozen electric Braille Writers to strengthen the transcribing service in the Institute.9

Bharati Braille, a common code for Indian languages, was accepted by the Government of India in 1951. During the year 1980-81 for the first time the Institute as finalized a set of contractions and abbreviations. A manual explaining the contracted code as well as setting out rules for reading and writing in Bharati Braille was blushed. A workshop was convened short after to arrive at a final consensus with regard to the acceptance of a common code of Hindi Braille contractions in collaboration with a social commission set up by the World Council for the welfare of the Blind. The Institute is working on the preparation of a Braille notation for mathematics and science.10

6.1.1. Roles and Responsibilities

The Institute is entrusted with the following11 important roles and responsibilities,

(a) To organize short-term training long-term and programmes for the personnel engaged in work for the blind in the country.

(b) To initiate, co-ordinate and promote meaningful research and development activities for the visually handicapped.

(c) To conduct model service programmes for the visually handicapped.

10 Ibid., at p. 87
(d) To produce books in Braille and on cassette tapes as well as equipment for the visually handicapped and to supply the same at highly subsidized rates.

(e) To run library services.

(f) To document and disseminate Information on work for the visually handicapped in India and overseas; and

(g) To educate the community about the potential of the visually handicapped.

6.1.2. Research Programmes

The Institute's research programmes are aimed at opening up new vistas of opportunities for the Visual handicapped in the field of education, employment a psycho-educational assessment with the use of appropriate technologies and methodologies. These programmes are run by offering Fellowships and through active co-operation of agencies like UNICEF and S&T Mission Mode.\textsuperscript{12}

6.1.3. Services

The Institute runs a Model School from pre-school stage upto high school, a Training Centre for imparting vocational training to blind adults and strives to secure placement for its trainees. The Institute also provides home-based services to the newly blinded individuals and their families. These services are extended free of charge. The Institute manufactures a wide range of Braille writing, computing, recreational and travel aids for the visually handicapped, which are supplied at highly subsidized prices.

6.1.4. Reading Material

The Institute produces books in Braille and supplies them free of charge from class I to VI. Educational reading material from Class VII onwards and other books are also produced and supplied at greatly subsidized rates.

\textsuperscript{12} Ibid., at p. 66
6.1.5. Consultancy and Community Awareness

The Institute has available with it a wealth of information relating to the visually handicapped and programmes being run for them in the voluntary and government sectors in India and abroad. It has also developed useful audio-visual material for enabling the community to know the potential of an adequately trained blind individual.

6.1.6. Training Programmes

The institute runs a number of long-term and short-term training programmes. The Institute's long-term training programmes aim at providing schools for the blind as well as regular schools having integrated programmes of education, the required number of trained special teachers. It conducts training courses for both primary and secondary teachers of the visually handicapped. It also conducts courses for orientation and Mobility instructors.

The Institute organizes a wide array of training/orientation/ refresher courses of shorter duration. These courses cover a wide spectrum of professionals engaged in work for the blind. Thus, school teachers, vocational instructors, para-medical workers, state government officials monitoring services for the handicapped, officers engaged in placement of the handicapped as well as personnel involved in production of Braille Books benefit from these short-term courses.

6.1.7. Training Centers

The Institute, in collaboration with State Governments, runs Teacher Training Centers at:

(a) Bhubaneswar (Orissa).

(b) Hyderabad (A.P.), and

(c) Patna (Bihar), where primary level teachers are trained. It also aids secondary level Teachers Training Centers run by leading Voluntary Organizations at (a) Narendrapur (W.B.) and (b) New Delhi.
6.1.8. Education for the Visually Handicapped

Model School for the Visually Handicapped which offers education to blind boys and girls up to 10\textsuperscript{th} class. Students are provided free boarding, lodging, clothing and tuition, a pocket money is also provided. Braille books and recorded materials are made available to the students in order to enable them to pursue their studies effectively. Human reader services are also provided free of charge.

The school has been upgraded to Sr. Secondary (10+2) level and is affiliated to Central Board of Secondary Education. The institute admitted 8 students in class 11\textsuperscript{th} in 1993 and admissions to class 12\textsuperscript{th} would start in the next academic year. Blind children are taught through Braille and tactile media whereas the partially sighted and low vision children make use of magnifying devices) to read print. The school children are provided free boarding, lodging, clothing, tuition and other facilities besides monthly pocket money. The school has also started a unit for visually handicapped children with additional disabilities from September 1993 with 4 mentally retarded visually handicapped children. There were 146 children (96 boys and 50 girls) on roll of the school in 1993.\textsuperscript{13}

The Institute also operates primary school for partially sighted children. Those children whose vision is anywhere between 20/200 and 70/200 are eligible for admission. They should normally be between 6 to 14 years of age. The facilities for partially sighted children have hi thereto been somewhat limited. Like others, partially sighted children also are provided free boarding, loading, clothing and tuition. The blind children are taught through Braille and tactile sensation, whereas the partially sighted and low vision children make use of magnifying devices to reach the printed text.\textsuperscript{14}

6.1.9. Central Braille Press

Established in 1951, the Central Braille Press publishes Braille literature largely in Hindi. The publication of school text-books is its primary concern. However, some


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general books are also published. The press publishes a monthly journal entitled Nayan Rashmi. This is a digest containing wholesome articles selected from well-known Hindi journals. A few original articles are also included. Braille books published by the Central Braille Press are heavily subsidized and are sold to blind customers at a nominal price.

A total of 25,600 Braille volumes were bound, 44 new titles and 19 reprints were brought out during the year 1992-93. The total value of the sale of books and journals was RS.2, 50,880.60\(^\text{15}\) The Institute has recently started education programmes for the visually handicapped students with additional disabilities. It has also started publishing a Weekly News Magazine entitled Braille Times, which provides news to its Braille readers.\(^\text{16}\)

Considering the fact that collection, compilation and dissemination of information is one of the imperative needs of the time, the Institute has taken up a project named Generation of Information concerning aids and appliances for the visually handicapped. The Institute has compiled information regarding aids and appliances available in developing countries for the rehabilitation and education of the blind. The Information in the directory is based on the material provided by manufacturers of different aids and appliances throughout the world.\(^\text{17}\)

6.1.10. National Library for the Handicapped

The Institute operates a library which has a large number of Braille volumes in English, Hindi and some other languages. Any blind person over 16 years of age could avail himself of the services of the library free of charge. Braille books are sent out by post. Braille literature is carried throughout India free of postage. The library has started recording services. Books recorded on special cassettes are loaned to institutions and members. The library offers free lending services to the visually handicapped


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readers all over the country. It has 45948 Braille volumes, 7761 print books. The library has a total membership of 2980 persons.\footnote{Government of India (1994-95): \textit{Ministry of Welfare}, Annual Report, The number of library membership seems to be decreasing, whereas the number was 16292 at p. 51.}

The library is equipped with:–

(a) Ink Print Section having books in (i) English, (ii) Hindi, and (iii) Other Regional Languages.
(b) Braille Section.
(c) Talking Book Section which records books and periodic magazines.
(d) Documentation section.

6.1.11. Workshop for Making Braille Appliances

One of the tasks of the Institute is to undertake the manufacture, distribution and development of tangible appliances for the blind. The workshop manufactures such simple items as Braille slates, pocket frames, abacus, tailor frames, chessboards, playing cards, walking sticks, etc. in the workshop and supplies to blind individuals and institutions for the blind at highly subsidized rates. The Institute is also manufacturing Braille short-hand machines in collaboration with ALIMCO, Kanpur. These machines are used by stenographers working in various organizations. In the year 1993-94, the workshop registered a sale of Rs.1, 94,883.62\footnote{Annual Report, 1993-94 at p. 51}

6.1.12. Sheltered Workshop and Other Programmes

The Institute has a sheltered Workshop\footnote{Annual Report, 1994-95 at p. 87} and units for rural extension programme, management of newly blinded, home management guidance and counseling, orientation and mobility services. The workshop offers short-term employment o the blind men. They are engaged in occupations such as chair caning, weaving, candle making, and the manufacture of certain engineering components.

For the past 30 years or so, the Ministry of Defense has been supplying chair caning work to this Institute without the formality of inviting tenders. The Bharat
Heavy Electricals has often placed substantial orders on the Institute for the manufacture of some of its engineering components.

Ex-trainees of the Training Centre for the Adult Blind are taken in the workshop. Every effort is made to find alternative employment for them in the open market as soon as possible. Further, they are not forced out of the workshop until they obtain a satisfactory alternative employment.\textsuperscript{21}

\textbf{6.1.13. Vocational Training}

The Training Centre for the Adult Blind offers training in a wide range of engineering and non-engineering crafts. The duration of training varies according to the type of craft chosen. However, the maximum period allowed is two years. Training is offered to adult blind men and women between 18 and 40 years of age. The trainees are provided free boarding, lodging, clothing, and tuition. Trainees are given rail fares for coming to the centre and for the return journey on the completion of their training. Training is offered in the following major subjects.

| Engineering Crafts       | 1. Light engineering  
|                         | 2. Radio engineering. |
| Other subjects           | 1. Hindi and English Braille shorthand and typewriting,  
|                         | 2. Audio typing,  
|                         | 3. Standard English and Bharti Braille,  
|                         | 4. English and Hindi typewriting,  

During the year 1993-94, 79 adults (65 men and 14 women) completed their training.\textsuperscript{22}

\textsuperscript{22} Annual Report, 1993-94 at p. 51

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6.1.14. **Manpower Development**

The Institute conducts long-term as well as short-term training programmes for various professionals engaged in the work for the blind.

(i) **Training Course for Secondary School teachers of the Visually Handicapped.**

The Institute is conducting training courses for secondary school teachers of the visually handicapped at its campus, Blind Relief Association, New Delhi and Blind Boys' Academy, Narendrapur, West Bengal. A total of 60 teachers concluded their training during the year 1993-94 (19 at NIVH16 at BRA, New Delhi and 25 in Narendrapur, West Bengal).

(ii) **Training Courses for Primary School teachers for the Visually Handicapped at State Level:**

The Institute in collaboration with the concerned State Government is conducting training programmes for primary school teachers of the visually handicapped at Bhubaneshwar (Orissa), Hyderabad (A.P) and Patna (Bihar). A total number of 65 teachers received training during the year 1993-94 (24 at Hyderabad, 18 at, Patna and 23 in Bhubaneshwar)

The Institute conducted 13 short-term courses during the period (April 93 to November 93) covering a total of 245 persons from allover the country.\(^{23}\)

A comparative statement of long-term and short-term programmes organized by the Institute during the last 4 years is given below:\(^{24}\)

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<tr>
<td>2.</td>
<td>Short-term</td>
<td>24</td>
<td>23</td>
<td>20</td>
<td>20</td>
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\(^{23}\) Annual Report, 1993-94 at p. 51
\(^{24}\) Annual Report, 1994-95 at p. 85


6.1.15. Research and Development

The Institute has undertaken a large number of projects in the field of research. Most of these projects are related to opening new opportunities for the blind and visually handicapped in the field of education and rehabilitation.

<table>
<thead>
<tr>
<th>Sr.No.</th>
<th>Name of Project</th>
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<tbody>
<tr>
<td>1.</td>
<td>Identification of developmental lag and preparation of intervention material for the visually handicapped infant’s pre-scholars.</td>
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<tr>
<td>2.</td>
<td>Construction of NIVH battery of performance test for intelligence for visually handicapped.</td>
</tr>
<tr>
<td>4.</td>
<td>Information processing in visually handicapped.</td>
</tr>
<tr>
<td>5.</td>
<td>Equipment to be procured for upgrading the technology demonstration cell at NIVH.</td>
</tr>
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A research project on Analysis of Existing Braille Reading Techniques was taken up with UNICEF assistance in 1991:

The objectives of this project were as follows:

(i) To undertake a survey of existing teaching methods and reading techniques in a dozen schools for the blind in the Hindi-speaking region.

(ii) To prepare a teaching manual based on the findings.

(iii) To establish co-relations between various teaching methods, reading speeds and techniques, comprehensions to determine preferred methods and techniques at different age levels.

(iv) Advocating the utilization of preferred methods and techniques at different age levels.
Under this project - the film prepared at various schools reading identification for of Braille characteristics were screened and relevant material for preparing- the final film selected. Efforts were made to prepare U-matic film.

6.1.16. Regional Centre at Poonamallee, Madras

The NIVH runs a Regional Centre at Poonamallee, Madras which provides training in various vocational trades to the visually handicapped adults from southern region. These trades are: Electronics, Stenography, Computer, Mobility, basic rehabilitation, brush making, self equipment training, recanting at rural centre and assessment training. Support and guidance is rendered to the trainees, pursuing their self-employment in Electronics and related trades.

In the area of research and development, the Centre has completed a project "Study of working and c0y'ger-ge of blind welfare Institutions in the Southern Region". Data from 281 organizations have been collected and compiled. Tamil Nadu has the largest number of agencies, i.e., 136 followed by 74 from Karnataka, 35 from Kerala, 33 from Andhra Pradesh and 3 from the Union Territory of Pondicherry. Apart from providing reliable and easily accessible information on the range and variety of services being offered in the southern region, data collected through this project has facilitated preparation of a Directory. Copies are available on request on a first come first served basis.

The Centre has finalized duplication of existing awareness material (3 films and 10 spots) in Tamil language. The material is available in a single videocassette at Rs. 70/ - excluding forwarding charges. Duplication in Kannada language is under completion at the request of the government of Karnataka and subsequently Telugu & Malayam will be taken up.

(a) National Association for the Blind (NAB)

The NAB provides a common platform to all the schools, institutions- and associations for the blind in providing multifarious activities for the education, training, recreation and social integration of the blind. This is the only organization which seeks

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25 Annual Report, 1992-93 at p. 61
26 Id., at p. 62
27 Annual Reports (1992-93) at p. 62
28 Supra note 9, pp. 155-56.
the total rehabilitation of the visually handicapped, taking into consideration all aspects of their cultural, social and economic life.

The NAB conducts a conference of the blind publishes Braille literature. The association is the pioneer organization which started sending blind children to normal schools where they are taught through specialized equipments and with the help of resource teachers.

The NAAB is recognized by the State and Central Government, the voluntary agencies and by the public as a national body working for the welfare of the blind. Most of the schools, institutions and organizations of the blind India are affiliated to the association. It is also given recognition by the World Council for the welfare of the blind in which it has full representation.

On the rehabilitation front, the Community Based Rehabilitation (CBR) Programme of the Rural Activities Committee, affiliated to the National Association for the Blind, has demonstrated an efficacious, cost-effective methodology for the rehabilitation of the rural blind. The scheme aims at the resettling the rural blind in the family trade, rural craft or agriculture besides checking the migration of the rural blind to the cities in search of jobs and security. The project, first tried out in Dholkia in Gujarat, has attracted attention in India and abroad for its cost-effectiveness with the assistance of the Royal Commonwealth Society for the Blind, scholarships and other forms of aid to the blind persons and to the institutions for the blind in India are all routed through the NAB. Notable among these is the granting of four scholarships every year by the Perkins School, for the Blind, U.S.A. to Indian teachers for the blind.

(b) The Tata Agricultural and Rural Training Centre for Blind, Phansa, Distt. Valsad, Gujarat. Three decades ago, in January 1960, the National Association for the Blind, India, gave a pioneering lead in starting the first ever Agricultural and Rural Training Centre for the Blind at Phansa in the country. It acquired a lovely estate of some 240 acre(s) at Phansa, a Coastal village in

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30 Supra, note 9 at p.156-57.
Gujarat State with the assistance from the Royal Commonwealth Society for the Blind, London.

With the help of the Royal Commonwealth Society for the Blind, an expert, Mr. Ronnie Babonau, who had organized the Farm-Crafts Centre at Ikeja, Nigeria, the Phansa project started training the blind in agriculture, horticulture, floriculture, animal husbandry, dairy, poultry farming, fish culture, oil-extraction from oil seeds, running of small village shops and common rural crafts and trades. The centre offers training in agriculture and rural pursuits to blind person and is intended to train him as a useful and contributive member of the family unit so that he can assist the family in various farms and non-farm jobs. He is made to become useful to the family in several ways.

A number of trainees from all parts of the country are sent for training in the Centre. The training is of one year duration and is imparted on community plots. Blind are given training in almost all the normal farm operations performed by sighted persons.

The Centre aims at developing the blind as multipurpose farmers so that in lean agricultural seasons, they could make an honest living by assisting the family in farm and non-farm jobs, allied pursuits and rural crafts and trades like brick-making, pottery, bidi-making (indigenous cigarettes), running oil-ghanies, basket making and Coir rope making, matting palm leaves, hut making and similar other rural occupations. The centre is one of the largest training centers of its kind in the world and it receives world-wide attention and financial help. It also serves as a training centre for instructions from the Afro-Asian world.\(^{31}\)

\((c)\) National Academy of the Teachers of the Blind

In co-operation with the National Christian Council, the National Association for Blind established a National Academy of the Teachers of the Blind. The Academy has its own home teaching schemes. The first home teacher for the blind in India was appointed in Bombay by the NAB in 1961. The NAB has set up in Bombay under the Academy a sheltered workshop for the blind. The workshop

\(^{31}\) Ibid., at p. 56
located in a modern and spacious building was inaugurated on 25 January, 1963. It has three sections namely industrial, contracts and light engineering, and trains 100 blind workers per year. The Association has also its own training books library. Besides the prestigious projects mentioned above other star institutions associated with the NAB are Pheroze and Noshir Merswamriji Rehabilitation Centre for the Blind; the NAB Home for Aging Blind; Lonavia in Maharashtra and BAB-Mata Lachmi Day Nursery for Blind Children, Bombay.32

In 1966, the NAB workshop for the Blind appointed a Mobility Instructor for its Industrial Rehabilitation Unit. Later, the NAB Pheroze and Noshir Merswamriji rehabilitation Centre for the Blind, Mount Abu, and a few other institutions for the blind appointed full-time/part time Mobility Instructors. Some of these instructors were sent abroad for training in Orientation and Mobility. In 1971, the Government of India launched a national programme to train Mobility Instructors. In 1976, the Christoffel Blinden Mission, with the help of German experts, conducted a short-term mobility course in South India. In 1977, on the occasion of its Silver Jubilee Celebrations, the NAB in collaboration with the Royal Guide Dogs for the Blind Association of Australia and Force 10 conducted a short-term Orientation and Mobility training course which was able to train twenty instructors to serve the blind. In 1978, again with the help of the Australian Council of Churches and Force 10, the NAB established the Department of Rehabilitation where regular training courses for the Mobility Instructors are being organized.33

6.2. Institutions for the Orthopedically Handicapped

Artificial Limbs Manufacturing Corporation of India, (ALIMCO) Kanpur in 1948 the first Artificial Limb Fitting Centre was set up at Pune by the Indian Army. There were only a few centers which would fit artificial limbs and manufactured them on a small scale without any standardization. Consequently, a wide gap between demand and supply existed. The Government of India was already alive to the problem But this, problem was accentuated in 1962, when the disabled military and Para

32 Ibid., at p. 33
33 I.J. Bharti, Darkness into Life, Supra note 29 pp. 41-42
military personnel had to wait for a long time to obtain artificial limbs. The situation worsened in 1965 and more so in 1971 during the wars with Pakistan.

In 1963 a team of experts from World Health Organization made a detailed study of the country's requirements of rehabilitation aids, prosthetic and orthotic appliances. They recommended the setting up of an artificial limbs manufacturing unit at Kanpur. The outcome of this is the setting up of Artificial Limbs Manufacturing Corporation at Kanpur, which is doing noteworthy services for the orthopedically handicapped in providing all sorts of artificial limbs.34

In consonance with social objectives and considering its nature of further activities, this Corporation was incorporated under Section 25 of Companies Act 1956. Being so it is a unique Public Sector Undertaking, incorporated under the above Section which was not supposed to earn profit etc., and declare dividends unlike other public sector undertakings. Further, to support its activities, it was envisaged right at the beginning that the funds required by the Corporation would mainly be made available through various Government and Public contributions, grants, donations etc. This is quite explicit in the Memorandum and Articles of Association of the Company.

The Corporation started its production in the year 1976 and carried out its activities as planned. However, in reality the funds as originally envisaged never flowed in this Corporation except once i.e. when the Corporation was established out of the grants sanctioned by National Defense Fund.

After commencing the production, Company made tremendous efforts towards designing and developing a complete range of all considerable aids and appliances meant for orthopedically handicapped people. Further the Corporation also produced a few very important products for meeting the requirements of visually handicapped. While doing so, the development cost to be incurred for any product, the quantum of demand, be it low or high, the commercial aspect of undertaking production of any item was never a deciding factor. This was in line with the objective i.e. to make the products available for meeting the requirements of disabled and to offer it at a reasonable and affordable price.

34 Supra, Note 9 at p. 165. -185-
Having produced the aids & appliances, ALIMCO had further to ensure that the services of the fitment of limbs reach near the door steps of the disabled. For this, a network of Limb Fitting Centers had to be established. Similarly here also profit-making was not the deciding factor for opening a Limb Fitting Centre. The aim was to open one Limb Fitting Centre in each district. A limb Fitting Centre has to act primarily as a service centre. For this ALIMCO collaborated with State Governments and established a chain of Limb Fitting Centers. Such centers were also set up through voluntary organizations and individuals, which today form the major base on which the rehabilitation programmes are moving forward. Today, there is a network of 161 limb fitting centers allover the country.\textsuperscript{35} ALIMCO, in collaboration with the district administration and voluntary organization, plays a leading role in conducting camps, thereby achieving better outreach to overcome the constraints of geographical spread of the country. It organized 92 camps in the year 1993-94 as against 40 and 35 camps in the year 1992 - 93 and 1991- 92 respectively.\textsuperscript{36}

ALIMCO is also the major implementing agency of the Ministry under the scheme of Assistance to Disabled persons for the purchase/fitting of aids & appliances. The corporation had been released RS.4 crores in the financial year 1993 - 94 for this purpose and the same amount was allocated for year 1994-95.\textsuperscript{37}

\textbf{6.2.1. Achievements}

ALIMCO, in accordance with its objectives, developed a wide range of aids & appliances for orthopedically handicapped as well as visually handicapped persons. The quality of the products are the best available in the country. This was achieved without entering into any foreign collaboration. It established a Training Institute 'NIPOT' (Now named as 'NIRTAR') to take a lead in ensuring availability of trained Orthotic and Prosthetic Technicians in the country.

The Company products have been exported to Burma, Bangladesh, Sri Lanka, Nepal, Afghanistan, Iran, UAE, Jordan and Angola etc. ALIMCO has been recognized

\textsuperscript{35} Annual Report (1994-95) at p.97  
\textsuperscript{36} Id.  
\textsuperscript{37} Id
as one to the potential source of supply by WHO, UNICEF and International Red Cross. They have been placing order on ALIMCO for supply of aids & appliances to various projects assisted by them. Key working results are depicted as under\(^{38}\) (in lakhs)

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<tr>
<td>Production</td>
<td>213.00</td>
<td>226.00</td>
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<td>Cash Loss</td>
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<td>81.00</td>
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<td>Sundry Debtors</td>
<td>89.00</td>
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<td>90.00</td>
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</table>

As a break-through in the field of Lower Extremity Prosthetics, molded P. U. foam Foot using live cast for various sizes has been developed under a project from Science & Technology Mission Mode.

A Modular Endoskeleton below Knee Prosthesis with a completely new concept has been developed at ALIMCO.

(a) **National Institute of Rehabilitation Training and Research (NIRTAR), Cuttack**

ALIMCO, Kanpur\(^{39}\), established the National Institute of Prosthetic and Orthotic Training (NIPOT) in 1975 as its adjunct centre to provide rehabilitation training and to fit and promote its aids and appliances. To give more stress on rural rehabilitation and for better functioning NIPOT was converted into a Registered Society and was renamed as National Institute of Rehabilitation Training and Research (NIRTAR). Since 1984 NIRTAR is an autonomous body and is under the administrative control of Ministry of Welfare, Government of India, and it is the only National Institute situated in rural area of Olatpur, 35 Kms away from Bhubaneswar and Cuttack in Orissa.

\(^{38}\) Annual Report, (1994-95) at p. 97
\(^{39}\) National institute of Rehabilitation Training and Research, Cuttack, Annual Report (1990-91)
6.2.2. Objectives

The major objectives of NIRTAR are-

(a) To promote the use of products of Artificial Limbs Manufacturing A Government Corporation of India of India Undertaking), Human resources development- to undertake, sponsor or co-ordinate the training of personnel such as Doctors, Engineers, Prosthetics, Orthotics, Prosthetic and Orthotic Technicians, Physic-therapists, Occupational-therapists, Multipurpose Rehabilitation Therapists and such other personnel for the rehabilitation of the physically handicapped.

(b) To conduct, sponsor, co-ordinate or subsidies research on bio-medical engineering leading to the effective evaluation of mobility aids for the orthopedically disabled persons or suitable surgical or medical procedures or development of new aids.

(c) Aids and appliances - to promote, distribute, subsidies the manufacture of prototype designed aids and to promote any aspects of the education and rehabilitation therapy of physical handicapped.

(d) Service delivery programmes - to develop models of service delivery programmes for rehabilitation.

(e) To undertake vocational training, placement and rehabilitation of the physically handicapped.

(f) Information to document and disseminate information on rehabilitation in India abroad.

(g) To undertake any other action in the area of rehabilitation of the physically handicapped. All the income is to be utilised for the fulfillment of above aims and objectives.

NIRTAR is totally funded by the Ministry of Welfare, Government of India. Research grants' are received from UNICEF Department of Science and Technology
and other agencies for various Projects. The capital expenditure, expenditure on pay and allowances to the staff, functional units, training etc. are met from these funds. The Institute generates its own income from fitment of aids and appliances, charges from patients, license fee and electricity fees, bank interest etc.

6.2.3. Human Resources Development

To fulfill the constant demand for trained manpower in rehabilitation, NIRTAR started two degree courses in Physiotherapy (BPT) and Occupational Therapy (BOT) of 3 years and six months in 1987. These courses are affiliated to Utkal University, Bhubaneswar. Certificate course in prosthetic and Orthotic was converted into Diploma in Prosthetic and Orthotic Engineering (DPOE) in 1987 which is affiliated to State Council of Technical Education and Training, Government of Orissa.

The NIRTAR conducts Diploma in Physical Medicine and Rehabilitation (equivalent to M.D.in PMR) for 2 candidates which is accredited by National Board of Examination (NBE). To motivate the professionals/NGOs and to update their knowledge on community based rehabilitation, the institute conducts short Orientation Programmes and Continuing Medical Education programmes in the field of rehabilitation. In-plant training to individual candidates mostly from NGOs is also imparted. The details of such courses planned are as follows:

(a) For Vocational Counselors working with the handicapped children and counseling their parents.

(b) Short Orientation Course on Rehabilitation for Government Officials at the Block-level implementing welfare activities.

(c) Short Orientation Course on Community Based Rehabilitation for professionals working in NGOs.

(d) For Primary School teachers on CBRS Hearing disabilities.

---

Rehabilitation for Orthopedic/General surgeons, Pediatricians, PRC doctors, PG (Ortho) students.

Occupational Therapy.

Physiotherapy.

Prosthetic and Orthotic Engineering.

Workshop on Management of Perthes disease for Doctors, Prosthetic and Orthotic Engineers, Physiotherapists.

6.2.4. Rehabilitation Services

Patients with locomotor/orthopedical disabilities due to poliomyelitis, cerebral palsy, congenital deformities, leprosy etc., and hearing handicapped are treated as rehabilitated. Patients/handicapped requiring artificial limbs and other rehabilitation aids and appliances are provided with the same to prevent the impairment leading to disability and to make them near normal and to carry on their activities for daily living.

The Institute has a 100-bed hospital, with all latest gadgets and equipments for assessment, reconstructive surgery, micro-surgery, speech therapy, physio-therapy and occupational therapy.

The physical performance during 1991-94 can be summed up in the table below:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment Clinic</td>
<td>27740</td>
<td>23446</td>
<td>25431</td>
</tr>
<tr>
<td>Surgery</td>
<td>2895</td>
<td>2362</td>
<td>2509</td>
</tr>
<tr>
<td>Physiotherapy</td>
<td>11231</td>
<td>13400</td>
<td>14869</td>
</tr>
<tr>
<td>Occupational Therapy</td>
<td>6134</td>
<td>6212</td>
<td>6037</td>
</tr>
<tr>
<td>Rehabilitation Aids/ Appliances</td>
<td>2702</td>
<td>2742</td>
<td>2961</td>
</tr>
</tbody>
</table>

---

41 Annual Report (1994-95) at p. 93
6.2.5. Outreach Programmes

Rehabilitation camps are organized at the interior and tribal districts of Orissa, M.P., A.P., Bihar, J&K etc. to provide aids and appliances to the disabled who are unable to reach any rehabilitation units. These camps are arranged in collaboration with district authorities and voluntary organizations. The numbers of camps held in the three years are as under:42

<table>
<thead>
<tr>
<th>Year</th>
<th>Camps</th>
<th>No. of Aids</th>
<th>No of beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>1991-92</td>
<td>5</td>
<td>645</td>
<td>396</td>
</tr>
<tr>
<td>1992-93</td>
<td>5</td>
<td>647</td>
<td>444</td>
</tr>
<tr>
<td>1993-94</td>
<td>5</td>
<td>628</td>
<td>474</td>
</tr>
</tbody>
</table>

6.2.6. Research Activities

The Institute tries to introduce new methods or techniques in treatment modalities, improving the aids & appliances, designing and fabricating new devices etc.

Research projects are also taken up with financial assistance from Department of Science & Technology.

6.2.7. Information and Documentation

The Central Medical/Technical library with a good collection of books on various facets of Disability and Rehabilitation and allied subjects serves the information needs of the staff, students and professionals in other organizations. It subscribes 90 foreign technical journals and also has a good collection of Audio-visual and teaching modules.

A 20-minute Documentary 'Brave New World' In English and Hindi (16 mm color and video film) and three T.V. spots on Childhood Disability with financial assistance from UNICEF have been produced.43

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42 Ibid. at p. 76
43 Ibid. at p. 23

The National Institute for the Orthopedically handicapped is envisaged as an apex body not only to arrange the most advanced and suitable form of total care in the rehabilitation of the orthopedically handicapped but also to act as a centre for assessment, research, education, coordination, and referral centre in all aspects of rehabilitations.

The Institute is gradually taking shape in the area and building where at one time a hospital for the crippled children and later on Dr. P.N. Roy group of hospitals and rehabilitation centre were located at Bon Hooghly on the Barrack pore Trunk Road in Calcutta.

This Institute has already started an advance bio-engineering department where splints designed on most upt-to-date, bio-engineering principle and prepared from sophisticated components supplied by ALIMCO and artificial legs of similar design are being fabricated and supplied. At the same time, research and fabrication of low-cost aids are being undertaken.

6.3.1. Objectives

This Institute has the following objectives:

(a) To develop manpower” for providing services to the orthopedically handicapped, namely training of physiotherapists occupational therapists, orthotic and prosthetic technicians, employment and placement officers, vocational counselors etc.

(b) To develop model services for the orthopedically handicapped population in the areas of restorative survey, aids and appliances, vocational training etc.

(c) To provide services and special services to the orthopedically handicapped people.

(d) To conduct and sponsor research into all aspects, relating to the total rehabilitation of orthopedically handicapped people.
(e) To standardize the aids and appliances for the orthopedically handicapped and to promote their manufacture and distribution.

(f) To serve as the apex documentation and information centre in the area of orthopedically handicapped.

(g) To provide counseling services to the State Governments and voluntary organizations, working for the rehabilitation of the orthopedically handicapped.

6.3.2. Rehabilitation Services

The Institute provides services through its various units viz., Assessment, Physiotherapy, Occupational therapy, Restorative Surgery, Bio-Engg., (Fitment services and aids), In-patient services, Vocational Counseling, Social Services, psychological counseling, Radiological, pathological Investigations and Electromyography.

The details of the services provided in the various years are as under:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>Assessment</td>
<td>7553(N)</td>
<td>6674(N)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9134 (F)</td>
<td>9795(F)</td>
</tr>
<tr>
<td>(b)</td>
<td>Physiotherapy</td>
<td>2613(N)</td>
<td>3310 (N)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>19027(F)</td>
<td>28584 (F)</td>
</tr>
<tr>
<td>(c)</td>
<td>Occupational Therapy</td>
<td>1135(N)</td>
<td>1143 (N)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>10142 (F)</td>
<td>10414 (F)</td>
</tr>
<tr>
<td>(d)</td>
<td>Restorative Surgery</td>
<td>730</td>
<td>687</td>
</tr>
<tr>
<td>(e)</td>
<td>Issue of Artificial Limbs and Aids</td>
<td>1775</td>
<td>1435</td>
</tr>
</tbody>
</table>

N = New Cases         F = Follow up Sessions

44 Annual Report, 1994-95 at 89.
6.4. Institute for the Physically Handicapped (IPH), New Delhi

This Institute for the Physically Handicapped, New Delhi is functioning under the administrative and financial control of Ministry of Welfare, Government of India. The Institute with the objective to alleviate the sufferings of the disabled persons conducts the following programmes:

1. B.Sc. (Hons) in Physical Therapy and Occupational therapy.
2. H. Sc. (Hons) in Physical therapy and Occupational Therapy (Post Diploma).
3. Diploma in Prosthetic and Orthotic Engineering.
5. Physiotherapy, Occupational Therapy and Speech therapy; out-patient services.
6. Special educational school up to primary level for the orthopedically handicapped children.
7. Vocational rehabilitation for the orthopedically handicapped.

The details of students undergoing training in these courses are as follows:45

<table>
<thead>
<tr>
<th>Year</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1992</td>
<td>142</td>
</tr>
<tr>
<td>1993</td>
<td>128</td>
</tr>
<tr>
<td>1994</td>
<td>88</td>
</tr>
</tbody>
</table>

The Institute runs OPD for delivering therapeutic services to patients with disabilities like paraplegic, hemiplegics, arthritis, cerebral palsy, post polio residual paralysis, congenital anomalies, etc.

6.4.1. Assessment Clinic

The assessment clinic is held everyday which examines the patients and refers them to different departments accordingly. There are Physiotherapy, occupational

---

45 Annual Report, 1994-95 at 94.
therapy, Speech therapy, Workshop and Vocational Rehabilitation Services. The following numbers of patients were examined in the Assessment Clinic:

<table>
<thead>
<tr>
<th>Year</th>
<th>No. Of Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>1991-92</td>
<td>3870</td>
</tr>
<tr>
<td>1992-93</td>
<td>3902</td>
</tr>
<tr>
<td>1993-94</td>
<td>4321</td>
</tr>
<tr>
<td>1994-95</td>
<td>3021 (upto 31.10.94)</td>
</tr>
</tbody>
</table>

6.4.2. Occupational Therapy OPD

In the out-patients department, patients with various disabilities like Poliomyelitis I Cerebral Palsy, Hemiplegic, Arthritis, Spinal Cord Injuries, Cervical and Lumber Spondylities, Fractures, Nerve injuries etc. are assessed, evaluated and given treatment using purposeful activities to improve or restore their functional capabilities impaired by disease or injury.

The O.T. Department aims at:

a. Restoration of Physical functions.

b. Independence in daily activities.

c. Development of work tolerance.

d. Maintenance of special skills.

The Department is well equipped with latest machines and equipments. The Institute also runs OPD in Physiotherapy and Speech Therapy.

6.4.3. Workshops

In the Workshop, artificial limbs, aids and appliances are fabricated and assembled for fitment according to the individual needs of patients suffering from...
disabilities of Neuro-muscular-skeletal origin. It has also tailoring, carpentry and painting sections.

The students of Diploma in Prosthetic & Orthotic Engineering are provided practical training on learning skills of Prosthetic & Orthotic Engineering technology.

The number of Prosthetic & Orthotic appliances fabricated and fitted during '1990-94 are as follows:

<table>
<thead>
<tr>
<th>Year</th>
<th>No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1990-91</td>
<td>2317</td>
</tr>
<tr>
<td>1991-92</td>
<td>2415</td>
</tr>
<tr>
<td>1992-93</td>
<td>2515</td>
</tr>
<tr>
<td>1993-94</td>
<td>3455</td>
</tr>
</tbody>
</table>

The Institute has a medium-sized printing press to cater for the printing and binding needs to the Institute, Ministry of Welfare and other Government Departments. The Printing Press is equipped with one Isograph Scanner-cum-Printer. One automatic off-set printing machine, one vertical Process Camera and one Plate Coating Whirler etc. The Letter Press Unit has one Automatic Printing Machine and one Plate Machine with hand composing facilities. The Binding Section has one Cutting Machine, one Stitching Machine and one Perforating Machine.

The Institute has a library to meet the requirements of students, staff and Guest faculty. There are 6053 books on various medical and professional subjects. 15 international journals on professional subjects are regularly received in the library, 352 professional & non-professional books worth Rs. 1.36 lakhs were added during the year 1992-93.

There are books on literature, fiction, encyclopedias and dictionaries etc. Library is also subscribing to newspapers and magazines.

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47 Ibid. at p. 56
48 Annual Report, 1993-94 at p. 61
6.5. Institutions for the Deaf

The first effort to systematic education for the deaf was made by the Roman Catholic Mission, Bombay in 1883. Next appeared the Calcutta Deaf and Dumb School in 1893. Church of England set up Zanana Mission School at Palamcottah in South India in 1896.

Six more institutions were set up by voluntary organizations in erstwhile Bombay State, M.P., D.P., and West Bengal during 1951-61 and two institutions during 1956-61 in Jalandhar and Ferozepur in Punjab.\textsuperscript{49}

The needs and problems of the deaf were considered at the United Nations Conference of Experts on Physically handicapped children for countries in South East Asia, held in Jamshedpur in December 1950. This was the first conference of this kind either in India or in Asia as a whole. Similar topics were discussed in 1953 by an Expert Committee on Deafness appointed by the central government of India, which included medical personnel and persons specialized in the education and welfare of the deaf. A government - sponsored seminar at Mussoorie in 1955 discussed a wide range of problems affecting the deaf in India. In that same year the Government of India established the National Advisory Council for the Education of the Handicapped whose purpose was to assist and advise voluntary societies and state governments concerning the education and welfare of the blind, deaf, physically handicapped and mentally retarded.\textsuperscript{50}

6.5.1. Ali Yavar Jung National Institute of Hearing Handicapped, Bombay

The Ali Yavar Jung National Institute for the Hearing Handicapped, Bombay was established in 1983 as one of the four National Institutes set up by the Ministry of Welfare, Government of India. The objectives of the Institute are manpower development, research, services, material development, information, documentation and dissemination or information, outreach and extension services and rehabilitation in the field of hearing impairment.

\textsuperscript{49} Supra, note 9 at 159
\textsuperscript{50} Taylor, Wallace, W. and Taylor; Wagner, Isabelle, Services for the Handicapped in India, International Society for Rehabilitation of the Disabled, New York, 1970) at 188.
To realize the above objectives, the institute has started three Regional Centers at New Delhi, Hyderabad and Calcutta, State collaborated centers at Bhubaneswar, NGO (Non-Government Organization) collaborated centers at Viakom (Kerala), Madras, and Allahabad. In addition to this it has a Training Centre for the Adult Deaf at Hyderabad.

6.5.1.1. Services

One of the main objectives of the Institute is to evolve standard techniques, methods of evaluation, diagnosis, programmes for outreach, development of teaching aids, community awareness materials and model services which in turn can easily be transferred and adopted by the non-governmental and other agencies. The institute plans to provide information and documentation facilities in the area of hearing and speech impairment at the national level.

The institute is rendering services in the following areas. Hearing evaluation

(a) Hearing-aid trial, prescription, fitting and repairs,

(b) Speech language evaluation.

(c) Speech language therapy

(d) Parent guidance and counseling.

(e) Psychological evaluation.

(f) Psycho-therapy, Behavior therapy and Play therapy.

(g) Educational evaluation.

(h) ENT, pediatric and Neurological evaluation

(i) Information Services

(j) Vocational guidance, counseling and placement.
Outreach & extension Services.51

The numbers of persons given rehabilitation in Services in 1991-95 are as follows:52

<table>
<thead>
<tr>
<th>Years</th>
<th>New Cases</th>
<th>Follow up</th>
<th>Ear Mould Cases</th>
<th>Hearing Aids Distributed</th>
<th>Socio-Repaired</th>
<th>Economic Rehabilitation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1991-92</td>
<td>11733</td>
<td>27667</td>
<td>4883</td>
<td>2533</td>
<td>2966</td>
<td>323</td>
</tr>
<tr>
<td>1992-93</td>
<td>14308</td>
<td>23104</td>
<td>4274</td>
<td>2313</td>
<td>2212</td>
<td>1030</td>
</tr>
<tr>
<td>1993-94</td>
<td>12000</td>
<td>33249</td>
<td>5216</td>
<td>2647</td>
<td>2193</td>
<td>331</td>
</tr>
<tr>
<td>1994-95</td>
<td>3000</td>
<td>15000</td>
<td>2000</td>
<td>1500</td>
<td>1000</td>
<td>138</td>
</tr>
</tbody>
</table>

6.5.1.2. Training Programme

A number of training programmes are being conducted develop professional manpower to deal with the speech & Hearing Handicapped. With a view to expand the rehabilitation facilities institute has set up three Regional Centers at Calcutta, Hyderabad and State collaborated centre at Bhubaneshwar and roped in a number of voluntary and non-government organizations involved in the development of manpower at different tiers. The details of the training programmes are given below.53

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Course</th>
<th>Duration year</th>
<th>Minimum entry qualification</th>
<th>Intake capacity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>B.Ed. (Deaf) (at Bombay)</td>
<td>1</td>
<td>Graduate in any discipline</td>
<td>25</td>
</tr>
<tr>
<td>2</td>
<td>B.Ed. (Spl. Edu.) (At Hyderabad)</td>
<td>1</td>
<td>-do-</td>
<td>15</td>
</tr>
</tbody>
</table>

52 Annual Report. 1994-95 at 84.
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Course</th>
<th>Duration year</th>
<th>Minimum entry qualification</th>
<th>Intake capacity</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>B. Ed. (HH) (At Calcutta)</td>
<td>1</td>
<td>-do-</td>
<td>10</td>
</tr>
<tr>
<td>4</td>
<td>B.Sc. (ASR) (At Bombay)</td>
<td>3</td>
<td>12th Science with PCB</td>
<td>30</td>
</tr>
<tr>
<td>5</td>
<td>B. Sc. (HLS) (At Hyderabad)</td>
<td>3</td>
<td>12th Science with PCB/M</td>
<td>10</td>
</tr>
<tr>
<td>6</td>
<td>Diploma in Education of Deaf (D.Ed.) (At Calcutta, Delhi, Hyderabad, Bhubaneshwar, Allahabad, Madras, Bangalore, Indore)</td>
<td>1</td>
<td>12th Standard</td>
<td>30</td>
</tr>
<tr>
<td>7</td>
<td>Diploma in Communication Disorder (DCD) (At Delhi)</td>
<td>1</td>
<td>12th Science</td>
<td>10</td>
</tr>
</tbody>
</table>

Explanations: PCB means Physics/Chemistry/Biology.

PCM means Physics/Chemistry/maths.

B.Ed. (Deaf), B. Sc. (Audiology and Speech Rehabilitation) are affiliated to University of Bombay and B. Sc. (Hearing Language and Speech) (deaf), conducted at Southern Regional Centre, Hyderabad; is affiliated to University of Osmania. B.Ed. (Deaf) conducted at Eastern regional Centre; Calcutta is affiliated to University Of Calcutta. It has also got affiliation for conducting B.Sc. (Hearing Language and Speech) from University Of Calcutta. This course is' expected to commence in the near future subject to creation of faculty and other supportive administrative posts as per requirement of Calcutta.54

Number of trainees who successfully completed these courses during 1991-94 is as under:55

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54 Ibid. at p.4
55 Annual Report, 1994-95 at 83
The Institution also conducts a number of orientation and short-term refresher' courses for different professionals working in voluntary, non-government institutions dealing with rehabilitation of the hearing and speech-impaired. The details are as under:56

<table>
<thead>
<tr>
<th>Year</th>
<th>No. of Programmes</th>
<th>No. of Beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>1991-92</td>
<td>50</td>
<td>2200</td>
</tr>
<tr>
<td>1992-93</td>
<td>22</td>
<td>867</td>
</tr>
<tr>
<td>1993-94</td>
<td>60</td>
<td>3497</td>
</tr>
<tr>
<td>1994-95 (April-Oct)</td>
<td>7</td>
<td>400</td>
</tr>
</tbody>
</table>

6.5.1.3. Material Development

The Institution has taken up the task of creating awareness and production of educational materials towards the rehabilitation of the target group. In addition to developing T. V., spots slides, audio programmes, posters, handout the Institution has produced a film on Deaf Girl child with the assistance of UNICEF.

6.5.1.4. Collaborative Programmes

(a) Service Centre: Looking at the dearth of Rehabilitation57 service facilities for the Hearing 3andicapped, the Institute has started a service centre in collaboration with the local voluntary organization at Shillong (Meghalaya), Patna (Bihar), Kashele (Maharashtra), Sangli (Maharashtra), Adoni (Andhra Pradesh).

56 Id. at p. 84
57 Annual Report, 1993-94 at 57-58
(b) *Parent Infant Programme*: The Institute has started the Parent Infant Programme with an objective to educate the Parents in management of their hearing-impaired child in the areas of maintenance of hearing-aid, health care, speech & language stimulation and overall behavior modification.

(c) *Pre-school*: With a view to enhance educational facilities for the hearing-impaired it was thought to be worthwhile to initiate pre-school centers so that the foundation of the school going children become stronger and help them to adopt the school curriculum in better way. To achieve this the Institute has already developed pre-school curriculum and started pre-school centers at Adipur (Gujarat), Bettia, Patna (Bihar), Keshele, Sangli, Ichaikaranji (Maharashtra), Adoni (A.P.), Bhubaneshwar (Orissa) in collaboration with the local organization.

(d) *Vocational Training*: While reviewing the status of vocational training opportunities for the hearing-handicapped, the institute felt it necessary to venture into the collaboration approach with the Government and Non-Governmental Organizations to enhance its vocational training facilities for the target group, particularly, in the rural and semi-urban areas. Up to 1993-94, the Institute had collaborated with 12 organizations and started vocational training activities for the hearing Handicapped at Danpur (Orissa), Calicut, Valakoe (Kerala), Tilawani, Sultanpur, Almora(U.P.), Indore(M.P.), Calcutta, (West Bengal), Bombay (Maharashtra) and Howrah (West Bengal).

(e) *Development of Training Module*: The Institute has developed training module of computer course for the hearing handicapped. This module "is developed for replication by other organisations who are interested in starting computer training for the hearing handicapped.) It has already started such training programme with Don Bosco School, Howrah and is expected to start with other organization shortly.\(^{58}\)

\(^{58}\) Ibid., at p.36
6.6. Institutions for the Mentally Handicapped

6.6.1. National Institute for the Mentally Handicapped, (NIMH) Secunderabad

Established in the year 1984, the main objectives of the Institute are to undertake human resources development, to develop models of care and habilitation, to identify, conduct and co-ordinate research, to offer consultancy services to voluntary organization, to undertake documentation and dissemination of information and to stimulate growth of services in the area of mental retardation.

At its headquarters at Secunderabad, the Institute has six departments of clinical psychology, medical science, special education, speech pathology, audiology, vocational training, and library and information services. Details of the services are as under:60

<table>
<thead>
<tr>
<th>Year</th>
<th>No. of new cases registered</th>
<th>No. of follow up classes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1992-93</td>
<td>1,409</td>
<td>14,262</td>
</tr>
<tr>
<td>1993-94</td>
<td>1,239</td>
<td>16,649</td>
</tr>
<tr>
<td>1994-95</td>
<td>1,361</td>
<td>20,438</td>
</tr>
</tbody>
</table>

The NIMH was established with the following objectives:

(a) To develop appropriate models of care and habilitation for the retarded persons appropriate to Indian conditions.

(b) To develop manpower for delivery of services to the mentally handicapped.

(c) To identify, conduct and co-ordinate research in the area of mental retardation.

59 Ibid.
60 Annual Report, 1994-95 at 82
(d) To provide consultancy services to voluntary organization in the area of mental handicap and to assist them wherever necessary.

(e) To serve as a documentation and information centre in the area of mental retardation.

(f) To acquire relevant data to assess the magnitude, causes, rural-urban composition, socio-economic factors country etc. of mental retardation.

(g) To promote and stimulate growth of various kinds of quality services for persons with mental retardation throughout the country.

6.6.1.1. Training Programme

One-Year Diploma Course in Mental Retardation is offered at 21 Centres in the country namely Bhubaneshwar, Bhopal, Bombay, Calcutta, Delhi, Guwahati, Hyderabad, Jaipur, Lucknow, Mangalore, Muvattupuzha, Madras, Rajamundry, Ranchi, Rohtak, Secunderabad, Tirupathi, Trivandrum, Udupi, Vadodara and Wai.

Total Number of trainees in these training centres are 348. The total number of trainees trained so far under this course are 1267.61

Three-year Bachelor Degree Course in Mental Retardation is run by Institute of Secunderabad. The intake capacity is 17 students per year. This course is affiliated to Osmania University. The objective is to train persons who would provide comprehensive basic services to persons with mental retardation at all levels of severity and age.

The total number of students who have passed the BMR course is 76 so far.

The Institute also provides short-term courses including refresher courses, national level seminars, workshops on behavior modification and parent training programmes.

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61 Ibid., at p. 102
The Institute provides multi-disciplinary team services for helping. The mentally handicapped persons and their parents. The cases are assessed by a general service team for psychological, clinical and educational assessments. The programmes which are decided include appropriate referrals, further remediation in special services of the Institute and providing consultancy to organization such as special schools where the person with mental retardation may continue to seek service. The services available to suit the various requirements are:

(a) Group activities.
(b) Medical management.
(c) Parent/family guidance and counseling.
(d) Physiotherapy.
(e) Psycho-social services.
(f) Special education intervention.
(g) Speech, language and hearing guidance.
(h) Vocational training and guidance.

Each year nearly 1400 new cases are registered in the general services while the follow-up visits are about 15,000 per year.62

Details of the services are as under.63

<table>
<thead>
<tr>
<th>Year</th>
<th>No. of new cases registered</th>
<th>No. of follow-up cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>1992-93</td>
<td>1,409</td>
<td>14,262</td>
</tr>
<tr>
<td>1993-94</td>
<td>1,239</td>
<td>16,649</td>
</tr>
<tr>
<td>1994-95</td>
<td>1,361</td>
<td>20,438</td>
</tr>
</tbody>
</table>

6.6.2. Karavalaxmban Kendra

This special education centre located at NIMH64 headquarters at Secunderabad admits about 85 children with mental retardation in the age range of 3 to 16 years.
Children are grouped into pre-primary, primary, secondary and pre-vocational levels. Admission is offered for a period of 2 years to children with mental retardation who have been regularly attending the group activity training programme of the Institution. This special education Centre also runs group activities for children with mental retardation during the afternoon hours. About 250 children per week benefit from this programme. The children in the morning school programme as well as in the group activity programme are provided systematic training and in addition participate in extra-curricular activities which include music, dance, sports, and other recreational activities. Special programmes such as Special Olympics are also actively organized. Parents/family interaction in all programmes is encouraged.

6.6.3. Parent Group Training Programme

The first encounter of child is with his parents. The child can learn better in the lap of his mother as his world is centered round his mother in the initial years. So to assume significance that the parents are involved by the various institutions about learning the techniques for raining their children with mental retardation in the home. Involvement of parents in the care, management and raining of children with mental retardation contribute significantly to the growth and development of such children. The aim of the parent training programmes is to arrangement services rendered by an institute by creating bareness about mental retardation and emphasize the importance of involvement of parents in skill training for 2 handicapped children. The NIMH undertakes various such raining programmes for the parents.

6.6.4. Material Development

The institute has made efforts to develop technical literature, training material and awareness material for community based rehabilitation services, which can be used by the voluntary organizations. The material developed for creation of awareness like videocassettes, lets and booklets are distributed, free of charge to many of the voluntary organizations. In addition, the books brought out by the institute viz. How to organize a special school How to organize a special class in a regular school Handbook for the trainers of the mentally retarded persons pre-primary level and training manuals are widely distributed among the voluntary organizations. Efforts are made to disseminate
all the scientific and technical information developed at the Institute to the voluntary
organizations as well as to coordinate with them in the care and management of mentally
handicapped persons.

Keeping in mind the needs of parents of the mentally handicapped persons, the
Institute has brought out Skill training booklets/pamphlets under the head "Towards
Independence Series", comprising ten booklets an nine pamphlets. This material
facilitates parents in training their children at home in selected skills four: deficit in
them. The Institute has also brought another publication titled 'Vocational Training and
Employment Persons with Mental Retardation' a compilation of paper presented in a
seminar organized by the Institute and the copies are distributed among voluntary
organizations professionals and parents of mentally handicapped children.

6.6.5. Extension Services

NIMH faculty has been instrumental in initiating and providing technical
consultancy for setting up service for the mentally handicapped persons in voluntary
organizations such as the following:-

NIMH staff provided technical assistance to initiate services at Up char special
school, Artillery enter, Golconda, Hyderabad.

With assistance from NIMH, a special section for Slow learners was started at
Neeraj Public School at Hyderabad. It provides remedial teaching and training
programme in an integrated educational setting. It has' three sections with about 20
children on roll.

NIMH staffs are actively involved in providing ongoing technical assistance to
several voluntary organizations providing services for mentally retarded persons:-

(a) PAMENCAP- MANOCHAITANYA: Special School, East Marredpally,
Secunderabad

(b) NIMH-MARPU Slum centre for Mentally Retarded Children, Addagutta,
Secunderabad
(c) Singareni Collieries Company Limited, Special School for Mentally Retarded Children, Godavarikhani

(d) A.P. PAMENCAP-Manokrishi, Special School, Goshamahal, Hyderabad

(e) SHIKHSANA- Vocational Training Centre for Mentally retarded Persons, VRC, Vidyanagar, Hyderabad

(f) POLYGARDEN, Vocational Training Institute for the Mentally Handicapped, Palghat, Kerala

(g) PENCAP - Manovikas Special School, Karminagar, A.P

(h) PAMENCAP – Nuclear Fuel Complex Special School, Hyderabad

6.6.6. Teleschool Programme

The Special Teleschool Programme was launched in March, 1991 on the World Day for the Disabled. The purpose of the programme is to train the parents of mentally retarded individuals. The programme covers the various aspects of training the mentally retarded at home. The first three programmes included introduction to mental retardation, causes and training parents.

6.6.7. Research Programmes

Mentally handicapped children generally pose varied behavior problems as their activities are not goal directed. These behavior problems interfere in their training and education. Research in behavior modification technology has demonstrated the application of such techniques in skill training and management of problem behaviors in these children. Keeping this perspective in view, a research project was developed with the objective to identify maladaptive behavior amongst mentally handicapped children and to prepare training manuals using behaviorally based methods for increasing desirable behavior and as well as for decreasing undesirable problem behaviors to be used by the special teachers in a classroom setting.

6.6.8. Regional Training Centre, Delhi

Early intervention services are offered by the NIMH Regional Training Centre (North), Delhi, for very young children with delayed development and mental retardation up to 5 years of age. Every month amount 40 to 50 children benefit from
this programme. The parents are given instructions for home management programme after demonstration of the skill training activities at the centre by the trained staff.

6.7. **Model School for the Mentally Deficient Children, (MSMDC) New Delhi**

Model School for the Mentally Deficient Children\(^{65}\) established in 1964 by the Ministry of Welfare, Government of India is now working under the NIMH, Secunderabad, since 1986. The school functions with the objectives of helping mentally retarded persons develop their potentials to the fullest extent. Several programmes are offered at MSMDC for achieving the same, which include: a) comprehensive assessment, b) self-help skill training, c) cognitive development, d) physical skills training, -e) pre-vocational and vocational skills training, f) socialization training, g) occupational therapy, h) parent counseling and guidance, and i) regular case work.

The special school carries out individualized training programmes for the children enrolled following assessment. Training is given in the areas of activities of daily living, functional academics, socialization, and communication, pre-vocational and vocational skills besides co-curricular activities such as arts, crafts, sports, dance, drama and music.

Special projects are undertaken at MSMDC for children such as celebration of important festivals, cooking projects, field trips and fancy dress. The children had opportunities to participate in Very Special Arts creative morning programmes. At times they are given certificates and in the Very Special Arts variety entertainment show by handicapped children of different institutions.

6.8. **Rehabilitation Council of India**

Rehabilitation Council of India, an apex body to enforce uniform standards in training of professionals in the field of rehabilitation of the handicapped in the country, was set up as a statutory body in 1993. The Council prescribes minimum standards of education and training of professionals; recognizes institutions for conducting training programmes, leading to the degrees or diplomas. The Council also recognizes foreign

\(^{65}\) See Annual Report (1990-91), (National institute for the Mentally Handicapped, Secunderabad), at 27.
degrees or diplomas or certificates on reciprocal basis and maintains Central Rehabilitation Register of persons who are allowed to practice or seek employment in rehabilitation services for the handicapped. Rehabilitation Council has finalized the standardization of 43 courses.

The aims and objectives of the Council are as follows:

(a) To prescribe the minimum standards of education and training of individuals;
(b) To regulate these standards in Government institutions throughout the country;
(c) To recognize the educational qualifications;
(d) To recognize the foreign educational qualifications;
(e) To withdraw recognition of defaulting institutions;
(f) To obtain information regarding education and training from institutions in India and abroad; and
(g) To maintain an Indian Rehabilitation Register.

The Rehabilitation Council has now been given statutory status through an Act of Parliament, namely, the Rehabilitation Council Act, which enables it to shoulder responsibilities or regulating the training of rehabilitation professionals in a big way. The Act has come into force w.e.f. 31.7.1993.

The General Council of Rehabilitation Council of India consists of 25 members including the Chairman of the Council. The Council is nominated by the Ministry of Welfare for a period of 2 years. The categories of members of the Council include representatives of Central Ministries, NGOs working in the field of handicapped welfare rehabilitation professionals, Members of Parliament and Social Workers.

Physical and financial progress reports are obtained by the Ministry of Welfare from the Rehabilitation Council of India and based on that report, further amount is released to them. The Ministry of Welfare also keeps a watch on the working of Rehabilitation Council of India by obtaining the periodical progress reports and the minutes of the General and Executive Council meetings of the Rehabilitation Council of India.
6.9. District Rehabilitation Centers (DRCs)

Government of India launched the District Rehabilitation Centre Scheme in early 1985 for providing comprehensive rehabilitation services to the rural disabled. The aims and objectives of the DRCs are - survey of disabled population, medical intervention and surgical correction, fitment of artificial aids- and appliances, therapeutically services; physiotherapy, occupational therapy and speech therapy, provision of educational services in special and integrated schools, provision of vocational training of job placement in local industries and trades, self - employment opportunities, create awareness 'for involvement of community and family, to create a cadre of multi-disciplinary professionals who could - take care of major categories of disabled in the district. At present 11 DRCs are functioning in 10 states in the country.  

6.9.1. Number of Institutions and their state-wise/City-wise Distribution.

Ever since India became independent, the Government of India as well as the State Governments have taken a number of initiatives in the field of rehabilitation of the disabled. As a result there has been a substantial leap in the number of institutions serving people with disabilities. For example, in 1947 the number of schools for the visually handicapped was only 32, today there are about 243 special schools. For the hearing handicapped the number of special schools was only 30 in 1947, today we have about 478 such schools. In all there are about 1200 special schools.

The number of institutions serving the four categories of handicapped viz., hearing handicapped, orthopedically handicapped, visually handicapped and mentally handicapped in the country are 2005 i.e. 601, 372, 406 and 626 respectively.

66 These DRCs are located in Bhubaneshwar, Kharagpur, Chengalpattu, Mysore, Tal Vasai, Kota, Bilaspur, Vijayawada, Bhiwani, Sitapur and Jagdishpur, see Annual Report, 1994-95 Annexure LIX at 215.


68 The information over here and in Tables 1,2,3 is compiled from the Directory of Institutions Working for The Disabled in India (1995) Supra, note 6.
Table 3
City-Wise Break-up of Institutions for the Handicapped

<table>
<thead>
<tr>
<th>Sr.</th>
<th>City</th>
<th>Deaf &amp; Dumb</th>
<th>Mentally Handicapped</th>
<th>Orthopedically Handicapped</th>
<th>Blind</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Bombay</td>
<td>30</td>
<td>34</td>
<td>11</td>
<td>15</td>
<td>90</td>
</tr>
<tr>
<td>2.</td>
<td>Calcutta</td>
<td>24</td>
<td>19</td>
<td>14</td>
<td>6</td>
<td>63</td>
</tr>
<tr>
<td>3.</td>
<td>Delhi</td>
<td>25</td>
<td>41</td>
<td>28</td>
<td>23</td>
<td>117</td>
</tr>
<tr>
<td>4.</td>
<td>Madras</td>
<td>18</td>
<td>22</td>
<td>20</td>
<td>13</td>
<td>73</td>
</tr>
<tr>
<td></td>
<td>Grand Total</td>
<td>97</td>
<td>116</td>
<td>73</td>
<td>57</td>
<td>343</td>
</tr>
</tbody>
</table>

The above tables show encouraging results. The maximum numbers of institutions for the handicapped are in Maharashtra followed by Tamil Nadu and Kerala. The minimum numbers of institutions working for the disabled are in Arunachal Pradesh and Sikkim (one each). However, city-wise Delhi leads with the number of Institutions followed by Bombay, Madras and Calcutta. Delhi’s having more institutions than any other Metropolitan city can be explained in the context of its being the headquarters of many national voluntary organizations.

The maximum number of institutions working for the mentally handicapped (626), followed by deaf and dumb (601) blind (406) and with loco motor disabilities (372). But this trend is not reflected in the city-wise break-up where Maximum number of institutions are working for the mentally and handicapped (116) , followed by deaf and dumb, orthopedically handicapped and the blind.

The highest number of government institutions working for the disabled are in Tamil Nadu (47) followed by Maharashtra and Madhya Pradesh. There is no government institution working in the states of Meghalaya, Mizoram and Sikkim and only one government institution each in the states of Arunachal Pradesh, Goa and Nagaland.

On the other hand, if we compare the number of government institutions with those of non-governmental institutions working in the States, Madhya Pradesh is at
number one. There are only 34 non-governmental institutions compared to 38 government institutions.

Again, Maharashtra tops the list of states having the highest number of non-governmental institutions (221) working for the disabled followed by Kerala and Tamil Nadu.

Now there is a growing awareness both in the government and the society about the need to reach out to the disabled to enable them to become self-sufficient and dependent. Towards this end, both government and voluntary agencies have undertaken measures for providing Para-medical services, special education support and care facilities, early intervention and family therapy, the development of techniques and new technology for artificial aids and appliances to increase the independence and quality of the disabled persons. Today, there is a growing recognition that disabled persons must enjoy and have access to the same rights and opportunities that are taken for granted for the rest of the society.

The history of rehabilitation services in the government sector is comparatively recent. Historically, the services deliveries for the disabled were concentrated in the voluntary sector. Social welfare services, especially in the fields of medicine and rehabilitation were undertaken by missionary activists as a part of their general programmes of social and economic development. As a result, a large number of societies in the non-governmental sectors were established, depending mainly on public support and donations, which would look after the sick and infirm, the destitute and the disabled. In recent years, these services have gained importance and government has stepped in to make these services standardized, professional and at par with such services offered all over the world. The government since independence has been focusing attention on the prevention of disabilities, provisions for physical restorative services, development of personnel and resource persons through the training of professionals, development of services through research and field trials and social and economic measures such as executive orders and enactments to ensure just distribution of the fruits of development to the handicapped population.
6.10. To Sum Up

An evaluation of the nature and performance of the institutions and organizations active in the rehabilitation of the disabled shows that the moorings of a culture and tradition which had made an Indian shun and looks down upon a disabled person, did yield place to a humanistic outlook, whether through a reference to the Vedic times or the political strategy of the Christian missionaries always on the look out for a foot-hold whenever misery offered an opportunity to do so. The reformation movement in India brought in its wake many a blessings for the Indian Society. A positive attitude towards the disabled was one of these. The slogan ‘Back to Vedas’ could not have come at a more appropriate time. That is how the pragmatic Britishers coincidentally found, way back in 1887, that doing something for the blind of India was something good both for them as well as Indians. Anyway, the ball was set rolling. It gathered momentum slowly and led to the establishment of a number of institutions and organizations both before independence and after it.

After independence, the policy-makers were permeated with idealism and were genuinely interested in all the noble things. But then the harsh political realities both international and domestic levels, compelled the planners to spend lesser on education and social welfare. Slowly it become a habit until the stimulus came from the U.N. declaration and the humanitarian concern shown by the world community which had got saddled with a funny kind of a guilt after the wars and proxy-wars witnessed during the 1910’s till 70’s and even beyond. During this time mankind had seen two world wars, wars in Indo-China, South Asia and West Asia which had left lakhs maimed and crippled. The industrial revolution and mechanization of production, too, increased the number of the disabled. Social tensions culminating in domestic conflicts and commercial riots, too, multiplied the number of disabled. Add to it the mad less desire of man to subdue nature and you had the number of the invalid human beings rising to appear to be a ghost starting one in the eyes. Someone had sinned. It was in such an international environment that IYDP was declared and Indian policy-makers too were made to see the ghost. They, too, were stirred into action.
The desire to do, something for the disabled manifested itself in the form of the institutions and organizations we have discussed in the foregoing text. However, the efforts have been handicapped by lack of financial resources, experience to some extent by scientific and technological backwardness in the earlier stages, and of late, the political uncertainties. India does lag behind the western countries as far as the quality and performance of their institutions and organizations is concerned. But India does have a claim of doing better than most of the developing countries, if not) the best of all.

One is really impressed when one sees international organizations buying aids and appliances for the handicapped from India. One is also impressed for a while, while looking at the number and range of these institutions and organizations. But it might be a little misleading when we keep in mind that India is a country of sub-continental proportions and with a population of 960 million, out of which more than 14 millions are disabled, the number of these institutions and organizations might not be sufficient. India is still to cover a very long distance and keeping in mind the present growth rate, it seems that she would be able to spend more on prevention of disability and rehabilitation of the disabled, and on creating awareness among the policy-makers, bureaucrats, people and disabled themselves. So be it.

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69 National Sample Survey Organisation, 47th round (July-December, 1991) cited in Government of India, Ministry of welfare, Annual Report, 1994-95 "at 66. However, the disabled organisations claim their number to be 80 millions, see The Tribune, dated 4th August, 1996 at 11.