



Disability is not Inability

Mainstreaming Persons with Disability



About Chittorgarh

Chittorgarh is an ancient town in the state of Rajasthan with a rich cultural heritage and abundant natural resources. Located in the south-eastern part of Rajasthan, Chittorgarh shares its border with other districts in the state, namely, Banswara, Udaipur, Rajasamand, Bhilwara, Bundi and Kota and on the eastern side it shares the border with Neemuch district of Madhya Pradesh.

Chittorgarh was the capital of former Rajput state “Mewar” which is remembered for bravery and valour of its rulers. The fort of Chittorgarh is spread in an area of around 2.8 km and is the largest fort in the country. Most parts of the district are hilly in nature and population is sparsely distributed. Availability of potable drinking water, like in most parts of Rajasthan, remains one of the biggest challenges for the people of the area. About 14 percent of the total population of the district is of schedule castes and another 21.5 percent of scheduled tribes.

In the recent past, some cement and zinc production units have come up and the district is coming up in industrial map of the state. Yet the tribal residents and rural population are yet to be benefited from these developments. Migration of labour remains a regular phenomenon as agriculture is not very developed in the district.

Chittorgarh ranks amongst the bottom eight districts according to the Human Development Report 2007 with human development index of 0.558 and is amongst the districts of priority in the community development intervention. The total population of the district is 1.8 million spread over an area of 10856 sq. km.

About CUTS International & CUTS CHD

CUTS-International: In 1983, CUTS, a rights advocacy group, began out of a rural development communication initiative, a wall newspaper entitled, “*Gram Gadar*” (Village Revolution). It regularly reaches far-flung and remote villages of the Rajasthan State and has been instrumental in providing a forum for the vulnerable communities and under-privileged classes to get justice. CUTS-International is working with mission of ‘Consumer Sovereignty in the framework of social justice, economic equality and environmental necessity, within and across borders.’

CUTS-CHD: To facilitate intervention in ‘community based action programmes’ at the grassroots level, the “Centre for Human Development” (CHD) was established in the year 1991 in the village Senthil of district Chittorgarh. Ever since its inception, CUTS has been pursuing consumer issues and community rights based action programmes at the grassroot level in three districts namely Chittorgarh, Bhilwara and Pratapgarh. CUTS-CHD is working with the mission “To be an innovative centre for strategic intervention to raise the living standard of people”. CHD is working on five programme areas as below:

1. Empowerment
2. Good governance
3. Health
4. Natural Resource Management
5. Child Rights

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Contents

<i>Abbreviations</i>	<i>i</i>
<i>Foreword</i>	<i>iii</i>
<i>Message from Sightsavers</i>	<i>vii</i>
1. Evolution and Background of the Project	1
International Scenario	1
National Scenario	3
State Scenario	3
Chittorgarh District Scenario	4
2. Brief Introduction of the Project	6
3. Areas of Intervention	10
A. Health	10
<i>Treatment of Eye Patients and Distribution of</i> <i>Spectacles</i>	10
<i>Case Studies</i>	11
B. Rehabilitation of Persons with Disability	13
<i>Case Studies</i>	15
C. Education of Visually Impaired Children	18
D. Awareness Activities towards Community Sensitisation	19

4. Disabled Persons Organisation Activities	21
5. Advocacy and its Impact	23
Project Coverage in Media	25
Glimpses.....	26

Abbreviations

ASHA:	Accredited Social Health Activist
BPL:	Below Poverty Line
CBR:	Community Based Rehabilitation
CHCs:	Community Health Centres
CHD:	Centre for Human Development
CSO:	Civil Society Organisation
CSR:	Corporate Social Responsibility
DHS:	District Health Society
DPO:	Disabled Person Organisation
DoSJ&E:	Department of Social Justice and Empowerment
ICDS:	Integrated Child Development Services
JLG:	Joint Liability Yojana
MNREGA:	Mahatma Gandhi National Rural Employment Guarantee Act
MVSS:	Mewar Viklang Sewa Sansthan

NHFDC:	National Handicap Financial and Development Corporation
NPCB:	National Programme for Control of Blindness
PIP:	Project Implementation Plan
PPP:	Public Private Partnership
PRI:	Panchayati Raj Institution
SGSY:	Swarnjayanti Gram Swarozgar Yojana
SHG:	Self Help Group
SSA:	Sarva Shiksha Abhiyan
UNCRPD:	United Nations Convention on the Rights of Persons with Disability
UNDP:	United Nations Development Programme
VI:	Visually Impaired
WHO:	World Health Organisation

Foreword

Persons with disabilities are still often ‘invisible’ in the society, either segregated or simply ignored as passive objects of charity. United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) is an international human rights treaty, which guarantees the protection of rights and dignity of persons with disabilities. Parties to the Convention are required to promote, protect, and ensure the full enjoyment of human rights by persons with disabilities and ensure that they enjoy full equality under the law. The Convention has served as the major catalyst in the global movement from viewing persons with disabilities as objects of charity, medical treatment and social protection towards viewing them as full and equal members of society, with human rights. As of October 2013, it has 158 signatories and 141 parties.

India ratified UNCRPD on October 01, 2007 and became a State Party. Therefore, India is legally bound to implement the provisions of the convention.

The Constitution of India ensures equality, freedom, justice and dignity of all individuals and implicitly mandates an inclusive society for all including persons with disabilities. In the recent years, there have been vast and positive changes in the perception of the society towards persons with disabilities. Majority of persons with disabilities can lead a better quality of life if they have equal opportunities and effective access to rehabilitation measures.

Census 2011 has shown an increase in the number of differently-abled people in the country with the figure rising from 21.9 million in 2001 to 26.8 million in 10 years. In percentage terms, it has risen from 2.13 percent to 2.21 percent. There are 14.9 million men with disabilities as compared to 11.8 million women in the country with the total number of disabled people over 18 million in the rural areas and just 8.1 million enumerated in the urban settings. The percentage of men with disabilities is 2.41 as against 2.01 in women.

However, assessments by various non-government organisations suggest between five and six percent of the country's 1.2 billion population suffers from some kind of disability. A World Bank report of 2007 entitled 'People with Disabilities in India: From Commitments to Outcomes', estimates persons with disabilities comprise between 4-8 percent or 40-90 million.

State-wise data from census 2011 shows that Andhra Pradesh, Maharashtra, Orissa and Jammu and Kashmir have more than 2.51 percent disabled population whereas in Tamil Nadu, Assam, Meghalaya, Assam and Nagaland, the percentage is less than 1.75. Rajasthan is having 2.28 percent of persons with disabilities.

The percentage share of disabled population is higher among males who comprise 55.9 percent whereas women comprise 44.1 percent. Social groups wise analysis shows that 2.45 percent of the total disabled population belong to the Scheduled Castes, 2.05 to the Scheduled Tribes and 2.18 percent to other than SC/ST. Even among these two social groups, the proportion of men with disabilities is higher as compared to women.

Over 5.4 million people have some kind of physical disability, followed by hearing impairment affecting 5.07 million and 5.03 million who have problems with their vision. Just about 2 million have speech disability, and 2 million are affected by mental

retardation and other mental illnesses. The proportion of women suffering from seeing, hearing and multiple disabilities is higher than men.

The Government of India formulated the National Policy for Persons with Disability in February 2006 which deals with physical, educational & economic rehabilitation of persons with disabilities. In addition, the policy also focuses upon rehabilitation of women and children with disabilities, barrier free environment, social security, research etc. The Government of India is having several schemes and programmes for translating this policy into action.

However, much more need to be done for the empowerment of persons with disabilities and protection of their rights.

Realising the importance of the need to work for the persons with disability, the partnership between Sightsavers and CUTS was established in 2010. Under this partnership a unique project was implemented by CUTS CART for ‘Mainstreaming Disability in Development in Rajasthan’ during 2010-12. During the same time the project for ‘Community Based Rehabilitation’ was initiated in Chittorgarh by CUTS Centre for Human Development (CHD).

Community-based rehabilitation (CBR) approach focuses on enhancing the quality of life for persons with disabilities and their families, meeting basic needs and ensuring inclusion and participation. CBR was initiated in the mid-1980s but has evolved to become a multi-sectoral strategy that empowers persons with disabilities to access and benefit from education, employment, health and social services. CBR is implemented through the combined efforts of persons with disabilities, their families, organisations and communities, relevant government and non-government health, education, vocational, social and other services.

This monograph is published under the project ‘Community Based Rehabilitation’ implemented by CUTS CHD. The project aimed to bring the change in the life of the blind people and connect them into the mainstream with the objective that no person in Chittorgarh district remains needlessly blind and those with irreversible blindness or low vision should have the same rights and access to services as their sighted counterparts.

The project formally concluded in July 2013 and CUTS is in the process of initiating the next phase of the project along with Sightsavers. This monograph captures the main outcomes of the first phase of the intervention.

I take this opportunity to thank Sightsavers for this partnership, especially Abraham George, Area Director; Praveen Kumar, Programme Manager and other staff of Sightsavers North West India Area Office, Jaipur for their guidance, support and direct involvement in the project. I also thank Prasanna Kumar, Director (Programme Operations), Sightsavers India and Archana Bhambhal, Regional Manager, Sightsavers, Bhopal for their continued support. I also thank Dharamveer Yadav (Centre Coordinator, CHD) and the entire project team for the successful implementation of the project and also for their efforts in bringing out this monograph.

I also express my sincere gratitude to all without whom the publishing of this monograph would not have been possible.

December 2013

George Cheriyan
Director
CUTS International

Message from Sightsavers

Everyone has the right to health, education, a livelihood and a life lived with dignity. However the needs of disabled people have traditionally been treated as special and separate and this has kept them outside mainstream society. Poverty has been the most pressing issue for millions of disabled people due to which they face multiple discriminations. While the United Nations estimates that 10 percent of the world's population lives with a disability, the World Bank estimates that one in five of the world's poorest people are disabled or live in a household with a disabled member. In such scenario social inclusion of disabled people continues to be a major challenge.

Community Based Rehabilitation (CBR) is widely accepted as one of the best approaches to enhancing quality of life for people with disabilities and ensuring that they are included in mainstream society. CUTS CHD and Sightsavers successfully completed one phase of a project on CBR approach benefitting hundreds of disabled people in Chittorgarh. A strong and active Disabled Peoples Organisation formed as part of the project is ensuring the rights of disabled people in the district and have effectively become their voice.

We at Sightsavers are happy to see this monograph, which we are sure will help disseminate the success of the project and will be useful for planners from government and non-government organisations, for ensuring inclusion of people with disabilities in

all development initiatives. My hearty congratulations to the project team of CUTS CHD for the successful implementation of the project and coming up with this learning documentation.

Praveen Kumar
Programme Manager
Sightsavers India

1

Evolution and Background of the Project

International Scenario

Persons with disability make up an estimated 10 percent of the world population, and they are the world's largest minority, and some 80 percent of them live in developing countries. Among the world's poorest people, 20 percent have some kind of disability. Women and girls with disabilities are particularly vulnerable to abuse. Persons with disabilities are more likely to be victims of violence or rape, and are less likely to obtain police intervention, legal protection or preventive care. Some 30 percent of street youths have some kind of disability, and in developing countries, 90 percent of children with disabilities do not attend school. In the developed world, a 2004 United States survey found that only 35 percent of working-age persons with disabilities are in fact working – compared to 78 percent of those without disabilities globally.¹

Earlier, several principles and policy guidelines on persons with disabilities had been adopted by the UN. These include the World Programme for Action Concerning Disabled Person (1982), and the Standard Rule on the Equalisation of Opportunities for Persons with Disabilities (1993). At the United Nations, the international policy discourse sought to advance the 'full participation and equality' of persons with disabilities. Most recently, the

Convention on the Rights of Persons with Disabilities (2006) has been adopted.

The Convention was adopted on December 13, 2006 at the UN Headquarters and opened for signature on March 30, 2007. There were 82 signatories to the Convention, which entered into force on May 03, 2008. The Convention is a major departure from viewing persons with disabilities as ‘objects’ of charity, towards viewing them as ‘subjects’ with rights, who are capable of claiming those rights and making decisions for their lives based on their free, and informed consent as well as being active members of society.

The UN International Day of Persons with Disabilities is observed every year on 3rd December.

In spite of advances in the international normative framework on disability, a gap between policy and practice continues to exist. All too often, disability and persons with disabilities remain invisible in the society and development. It is an urgent concern of the international community that disability is included in the emerging global development agenda such as in the context of follow-up to Rio+20 and the ongoing preparatory processes to define the United Nations Post-2015 development agenda.

Based on the information available to the Secretariat (UN), the following key issues were identified for inclusion in a disability-inclusive Post-2015 MDG framework:

1. Strengthening and applying the international normative framework on disability;
2. Promoting accessibility for inclusive and sustainable development;
3. Addressing gaps in capacity-building; and
4. Assessing the situation of persons with disabilities: inclusive monitoring and evaluation frameworks.

National Scenario

Before India ratified the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), it was having Persons with Disability (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 in place.

India ratified UNCRPD on October 01, 2007 and was the 7th country in the world and the first significant country to do so. The Convention is intended as a human rights instrument with an explicit, social development dimension. It clarifies and qualifies how all categories of rights apply to persons with disabilities and identifies areas where adaptations have to be made for persons with disabilities to effectively exercise their rights and areas where their rights have been violated, and where protection of rights must be reinforced.²

In India an estimated 22 million people suffer from one or the other kind of disability, which is 2.1 percent of the total population. Out of these, 12.6 million are males and 9.3 million are females. This includes persons with visual, hearing, speech, locomotors and mental disability. 75 percent of them live in rural areas. 75 percent are illiterate and 41 percent live below poverty line (BPL).³

The current Census 2011 in India for the first time revealed the data on disability and included new area of disability. Total disability in India is 2.21 percent of total population. In totality, there are 26,810,557 persons with disability and out of that 18,631,921 are in rural and 8,178,636 in areas including all eight types of disabilities.⁴

State Scenario

In the state of Rajasthan as well as Chittorgarh district 2.21 percent of the total population comprises persons with disabilities. In Chittorgarh, out of 2.21 percent of total disability about 11 percent

of persons with disabilities suffer multiple disabilities and are more vulnerable and are excluded in terms of education, health, participation and other forms of discrimination etc. Rajasthan alone has 6.45 percent of total disabled population in India.⁵

Besides UNCPRD and Persons with Disabilities Act, Rajasthan state has formulated main rules for the benefits of persons with disability, such as The Rajasthan Persons with Disability (Equal Opportunity, Protection of Rights and Full Participation) Rules 2011, The Rajasthan Government Scholarship to the Physically Disabled Rules 1981, The Rajasthan Handicapped, Crippled and Blind Person Pension Rules 1965 and The Rajasthan Government Financial Assistance to Disabled Individuals Rules 1986. In spite of various efforts, persons with disabilities are still socially excluded and do not have equal accessibility and other rights.

Chittorgarh District Scenario

In Chittorgarh, out of the total population, two percent are disabled. Chittorgarh and Nimbahera blocks of Chittorgarh district of Rajasthan have a total population of 3,56,678 – both male and female.⁶ Out of that population, around two percent are suffering from various disabilities along with multiple disabilities. Despite several rules/policies/acts, persons with disabilities are still excluded in terms of social, financial, accessibility, dignity of life and other form of discrimination.

After conducting a study in both Chittorgarh and Nimbahera blocks of Chittorgarh, the condition of persons with disabilities was found to be pathetic. They were not aware of schemes and services provided by the government and did not have health and medical facilities locally, especially in the area of eye. As per the National Programme for Control of Blindness (NPCB) there should be 15 ophthalmologists in district but Chittorgarh but the district has only two; there should be 30 ophthalmic assistants but the

district has only one; 30 vision centres are required but the district has only one which is defunct. Chittorgarh district as a whole has 11580 new cataract incidences and a surgery costs around ₹8000-10,000. Along with that, the district also has 17000 back-log of cataract patients.

It is in this context, Consumer Unity & Trust Society along with Sightsavers India implemented a project for persons with disabilities in two selected blocks viz. Chittorgarh and Nimbahera with focus on blindness, social inclusion and rehabilitation of persons with disabilities.

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- 1 www.un.org/disabilities/default.asp?id=150, accessed on February 02, 2014
 - 2 *Ibid*
 - 3 Data from Social Justice & Empowerment, Government of India
 - 4 Census, 2011
 - 5 www.hindu.com2004/08/17/stories/2004081711760500htm
 - 6 Supra Note 4

2

Brief Introduction of the Project

Objective: No person in Chittorgarh district remains needlessly blind and those with irreversible blindness or low vision should have the same rights and access to services as their sighted counterparts.

With the above objective, the Community Based Rehabilitation (CBR) project envisaged to incorporate four major components:

1. comprehensive eye services comprising awareness generation, prevention and curative services;
2. socioeconomic rehabilitation of persons with visual impairment including persons with other disabilities;
3. quality education of children with visual impairment through mainstreaming their education with normal-sighted children; and
4. formation and strengthening of a network of disabled people/ disabled people's organisation (DPO), which could carry forward the issues of advocacy with the district and other local administrative and other authorities.

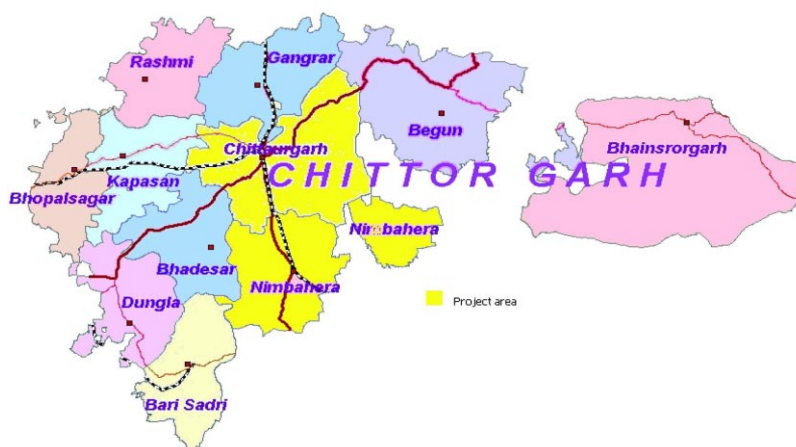
The CBR project focuses on enhancing the quality of life for persons with disability and their families, meeting basic needs and ensuring inclusion and participation. CBR was initiated in the 1980s by the World Health Organisation (WHO) but has now become a multi-sectoral strategy that empowers persons with

disability to access and benefit from education, employment, health and social services.

CUTS CHD, Chittorgarh had implemented the project with the support of Sightsavers in two out of a total of 11 blocks of Chittorgarh district, namely, Nimbahera and Chittorgarh.

Chittorgarh is a very remote and geographically scattered district where both public and private transportation facilities are not good. It is a hilly and a tribal district, and educational and awareness levels are low. There is no referral and first-aid system at the *Gram Panchayat* Community Health Centres (CHCs) or Primary Health Centres (PHCs). Hence for eye care, patients have to come either to the District Hospital at Chittorgarh or go to other hospitals out of the district or state. Many patients are unable to get treatment despite the fact that the number of cataract patients is very high. In the district, the district hospital is the only place where eye specialists/surgeons are available. There is only one private eye hospital in the entire district.

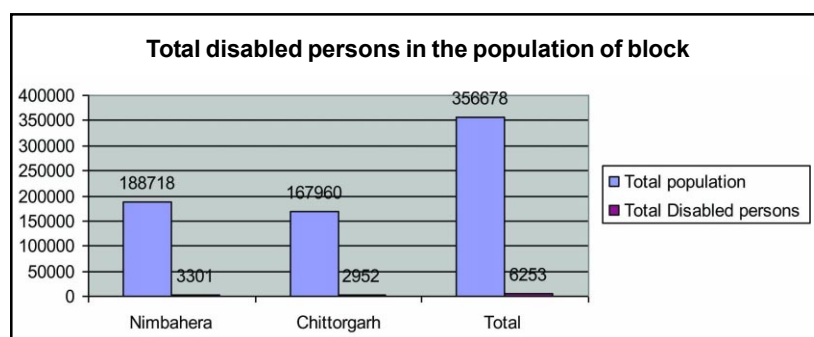
The duration of the project was of three years – from August 2010 to July 2013. Major activities of this project were community awareness, facilitating operation of cataract patients, education



of visually impaired children, rehabilitation of visually impaired persons, strengthening government system, establishing “disabled person’s organisations”, providing spectacles to needy children and benefit of government schemes to all persons with disability etc. To achieve the goals, CUTS CHD worked with relevant government departments, such as Medical & Health, Women & Child Development, *Panchayati Raj Institutions* (PRIs), Education, Social Justice and Empowerment, Banks and all public transport departments etc.

Though the project aimed at addressing the exclusion of persons with visual impairment (and persons with other disabilities), special focus was on reaching out to the poor and disadvantaged sections of the society as also women and children. The district has 49.1 percent BPL families.⁷

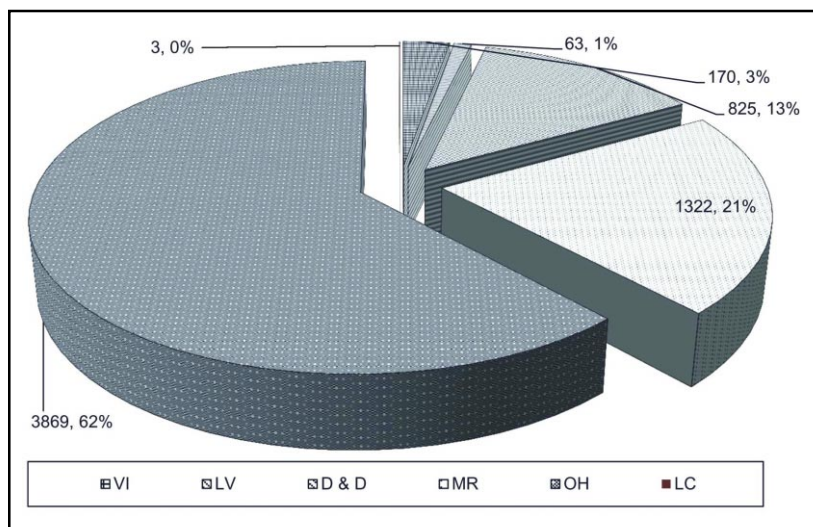
Overall Scenario of Disability in the Project Area			
Name of Block	Total population persons	Total Disabled	Percentage
Nimbahera	188718	3301	1.75
Chittorgarh	167960	2952	1.75
Total	356678	6253	1.75



⁷ BPL Census 1997

Types of Disability									
Chittorgarh block					Nimbahera block				
Type of disability	Male	Female	Total	Percentage	Type of disability	Male	Female	Total	Percentage
VI	43	56	99	3.35	VI	42	29	71	2
LV	13	3	16	0.54	LV	26	21	47	1
D & D	250	179	429	14.53	D & D	251	145	396	12
MR	413	225	638	21.61	MR	442	242	684	21
OH	1097	670	1767	59.86	OH	1334	768	2102	64
LC	2	1	3	0.10	LC	-	-	-	
TOTAL	1818	1134	2952		TOTAL	2095	1205	3300	

(VI = Visually Impaired, LV = Low Vision, D&D = Deaf and Dumb, MR = Mentally Retarded, OH = Orthopedically Handicapped, LC = Leprosy Cured)



3

Areas of Intervention

Key Activities & Achievements and Learning's under CBR project

A. Health

Treatment of Eye Patients and Distribution of Spectacles

During the project period, more than 1000 cataract patients turned up for cataract operation in both the blocks after a long intervention. Prior to the operation they were either unable to see or not see properly but after surgical intervention they could see clearly.

There are many organisations which are involved in free eye screening and then operating cataract patients either at their own hospital or at other authorised eye hospitals, such as Gomabai Netralay, Nimach; Ram Snehi Hospital, Bhilwara; Aditya Birla Cement, J K Cement, Mahaveer Sewa Samiti, Pensioner's Society, Rotary Club, Hindustan Zinc, Lion's Club, Alakh Nayan Hospital, Nanesh Hospital, District Hospital, PRIs, *Sarva Shiksha Abhiyan* (SSA) etc.

They organise eye camps annually and mainly for cataract patients and operate free of cost with funds from government/local donors/ corporate social responsibility (CSR). CUTS established good networking and coordination with them.

Apart from that CUTS also worked with the government departments, such as Health and Education and National Programme for Control of Blindness (NPCB) etc. for strengthening the referral mechanism and effective implementation of NPCB through the District Health Society (DHS).

CUTS worked with schools very closely and intervened in the area of school health programme run by SSA. CUTS mobilised eye screening in schools through E charts. CUTS was provided technical support to train nodal teachers who further trained school teachers on eye screening. CUTS also conducted community eye screening with village Accredited Social Health Activist (ASHA) workers and with the help of DHS, established three vision centres at PHCs in Chittorgarh and requested DHS to appoint an ophthalmic assistant to run these centres.

Case Studies

1. After Glaucoma operation Bherulal was able to see the world again

Bherulal Teli, 67 years old, lives in Pataniya village of Chittorgarh Block which is 18 kms from Chittorgarh. Gradually his vision started decreasing. He could not consult any eye specialist and soon lost vision totally in one eye and had substantially reduced vision in the other accompanied by headache and pain.



In the month of November 2011 he attended an eye camp where after checkup he was found to be suffering from Glaucoma. But his treatment was not possible at that camp.

After that he was motivated to visit an eye hospital in Madhya Pradesh where he was operated upon in January 2012. Medicines were also prescribed to be taken by him for several months.

During this period CUTS workers followed-up regularly and counselled him to take medicines as per doctor's advice. By June 2012, Bherulal informed that his vision was stable and not decreasing and that he was free of headache and pain. He was very happy after the operation; in absence of which he would have become totally blind.

2. Conducting eye screening

Eye screening was done in all government and private school children in 19 *gram panchayats* of Nimbahera block with the support of SSA and CSR. A plan was developed and a camp was organised in the centrally-located government school of that *Panchayat* and children came from all government and private schools including drop-outs. 2445 students were screened, out of which 1587 were found to be in need of



spectacles for vision correction. Spectacles were distributed to them.

The picture shows children wearing spectacles after disbursement in the Government school of Arniya Joshi Panchayat of



Chittorgarh block. After CUTS' intervention the school health intervention system has become more sensitive towards eye care.

Prior to the project eye healthcare was not a priority of the district which resulted in the increased cataract burden. CUTS initiated issues and helped form a district level core committee to suggest alternative solutions. In the year 2012 it was decided by the Committee that there is need to establish vision centres in all 11 blocks. CUTS took the responsibility to set-up three (Gangrar, Bhadhesar and Badi Sadri blocks) vision centres. NPCB issues have been included in DHS agenda.

B. Rehabilitation of Persons with Disability

Economic and social rehabilitation of persons with disability with special focus on visually impaired was carried out under this project. A person with disability, before getting linked with any government welfare scheme, is expected to procure certificates from various departments which is very challenging.

CUTS, as a development organisation, worked closely with Social Justice and Empowerment, PRIs, Health, Medical, Education, SSA, Integrated Child Development Services (ICDS), etc. Please see the table (on page 14) in this regard.

Benefit/Welfare Schemes Facilitated	VI	Others	Total
Disability Certificates	120	279	399
Bus Passes	95	238	333
Rail Passes	56	79	135
Pension (₹500 per month)	105	252	357
Pop Yojana (loan of ₹50,000 and ₹10,000 subsidy)	0	6	6
<i>Apna khet apna kaam</i> (₹10, 00, 00 help maximum) under MNERGA	2	3	5
Vishvas yojna (loan ₹10,00,00 maximum and subsidy ₹30000 maximum)	2	25	27
SHG formation and credit linkages (mix VI and others) Total loan of ₹70,00,00 to 150 persons	10	638	648
Musical instruments provided for livelihood purpose	2	0	2
<i>Sukhad Dampatya Yojna</i> (support by the Department of Social Justice and Empowerment ₹25,000)	0	2	2
Joint Liability Group (JLG) formation and credit linkages	0	1	1
Astha cards	2	17	19
Domicile certificates	35	62	97
Income certificates	34	76	110
Cast certificates	31	66	97
SGSY (loan of ₹50,000)	1	1	2
Personal loans (₹10,000 each)	2	0	2
White canes to the VI eligible persons	28	0	28
Tri cycles	0	58	58
Wheel chairs	0	6	6
Crutches	0	18	18
Hearing aids	0	5	5
Callipers	0	4	4
Jobs in MNREGA	7	18	25
National Handicapped Finance and Development Corporation (NHFDC)	0	1	1
Employment creation	0	8	8

Loans of more than ₹15 lakh have been distributed by the department to persons with disability after a long advocacy effort by CUTS. The loans are for different types of small income generating activities, such as starting a grocery shop, selling cement bags on retail, establishing flour mill, purchasing animals, agriculture purpose, to pay their loans etc. Training was also imparted to all visually impaired persons before starting any income generating activities, such as orientation and mobility, daily living skills, identification of currency notes, ideas for livelihood activity etc.



Case Studies

1. Visual impaired Devilal Regar now runs a flour mill and a grocery shop

Devilal Regar, (60 years old) lives in Gilund village of Chittorgarh block, which is 20 kms far from Chittorgarh district headquarter. Gilund is a far flung village and has about 1800 population.



Basic facilities like health services, education, road and means of income are very limited. Devilal is married with two children. 15 years back Devilal lost his vision due to some unknown reasons. Devilal consulted eye specialist but the doctor informed that his treatment was not possible. He is

totally blind. In the month of July 2011, CUTS Field Supervisor came to know about him during his visit to this village. Devilal was found sitting idle in his hut and was totally neglected by his family and treated as a burden. There was no source of income for him at that time.

When CBR project interventions were started with him from the month of July 2011, first of all his disability certificate was made. He was trained to walk and do other routine work independently. Self Help Group (SHG) was formed in that village and Devilal was made a member of that group. It was decided to establish a flour mill along with grocery shop. A *pakka* home (home for every climate) was required. The family members arranged some money and constructed two small rooms by themselves.

In the month of September 2011, he purchased a flour machine through a loan of ₹24,000 from SHG. Within a few months his monthly income reached ₹3000.

During this period a loan from *Swarnajayanti Gram Swarojgar Yojana* (SGSY) was also arranged for him with which he started a grocery shop. Now he is earning ₹3,000 per month from this shop. Devilal has also involved himself in agriculture work. Now he can move in his field independently and take care of crops. Devilal is positive towards his life. He is earning sufficient money with the help of other family members and enjoying a respectful life with dignity.

2. Ghanshayam Daroga, a locomotor disabled, got a new life after linking with DPO

Ghanshyam lives in Fachar Solanka village of Nimbahera block. He belongs to a very poor family and when the CBR programme started, he was not doing any work. He was not aware of any government welfare schemes also. Gradually he



came in touch with CUTS field supervisor and was told about various schemes and his form was filled for ₹10,00,00 loan under *Vishwas Yojana* in the month of January 2012. He was motivated to join DPO, Mewar Viklang Sewa Sansthan, Chittorgarh. He actively participated in the activities of DPO and very soon he became Secretary of DPO.

He was regularly following up with bank authorities for getting the loan and after a struggle of seven months, in the month of July 2012 he succeeded. From this, he started a grocery shop in his own village and within a couple of months he was able to generate an income ₹300 per day.

3. A successful SHG of Persons with Disability

In the year 2006 CUTS formed a SHG of persons with disability with 12 members in village Gilund. Out of the 12 members 6 were disabled. Each member saved ₹100 per month and deposited the same in a bank in which they have their savings account. After six month of formation they applied for loan and got ₹40,000. It was first credit linkage and they divided



that money equally between themselves and to utilise it for small businesses locally. Along with this, they started attending the *Gram Panchayat* meetings and raised the village development issues. They were able to get the area cleaned and have a hand pump installed.

C. Education of Visually Impaired Children

During the commencement of the project, visually impaired children were not aware of the process of admission in government schools. A total of 31 children were visually impaired in both blocks out of which only four were studying in special schools.



After a long intervention of CUTS and advocacy with the Education Department, these visually impaired children were provided admission in government schools.

CUTS provided technical support on how they could learn with other normal children and what changes from the teachers were required. Two special teachers to provide regular hand holding support to these children after school hours and to build the capacity of their family members were arranged.

During the implementation of the project their disability certificates were made and admission was done in government schools, braille books and braille kits were made available from the SSA department, escort/transportation allowances was given and pension of ₹500 started. Special teachers for VI children coached them on regular basis after school time. Training was given to them on mobility and daily life skills. They started to participate in tournaments which were organised by SSA at district level.

Now from Chittorgarh district especially the two blocks, where CBR intervention was done, several children participated in district level tournaments and some children participated in Mumbai and received prizes.

A VI child (Lokesh) got a prize after a tournament which was organised by SSA at Chittorgarh district.

D. Awareness Activities towards Community Sensitisation

Awareness generation is an important tool towards dissemination of information on the rights, entitlement, benefits and health behaviour practices which play a very crucial role in sensitisation of the family, community and other stakeholders.

During the project period, various awareness and sensitisation activities were carried out by the organisation in participatory approach. 12000 stickers and 5000 leaflets were printed regarding the project activities and distributed in the villages. Quarterly newsletter *Samavesh* was published which covered case studies, project achievements and other relevant information.



A major step towards social rehabilitation of persons with disability was providing a congenial environment in which they could overcome the feeling of exclusion from the society. One of the main reasons for the same was the insensitivity of the society towards persons with disability.

The project through regular counselling of the family members and sensitisation of various stakeholders, i.e. PRI members, Social Justice and Empowerment (SJE), SSA, government officials, bankers, community leaders and educators facilitated the creation of an enabling environment where all have equal opportunity to participate and express themselves. They now actively participate in the regular family and community affairs. This indicates their acceptance in the community.

The project facilitated creation of a network of persons with disabilities in Chittorgarh with the aim to create awareness and help raise their voices. There are several examples of families who are now happy to see the positive changes in such disabled members.

4

Disabled Persons Organisation Activities

DPO activities were strengthened in Chittorgarh district. Persons with disabilities registered their organisation as “Mewar Viklang Sewa Sansthan” (MVSS) for working for the rights and benefits of such persons. The organisation assists in making disability certificates, bus passes, rail passes, pension certificates, SHG formation, getting loan under various schemes etc. for persons with disabilities. The organisation has raised funds of around ₹20000.



MVSS has spread to four blocks of Chittorgarh district. Its members were trained on various groups' formation on rights, and entitlement of persons with disability, access audit of government offices, schools and development of future plans to strengthen the DPO and take-up their issues with various stakeholders. The DPO is working continuously to increase its membership base so that forum can contribute to its objectives by being a part of it.

As of March 2011 more than 200 persons with disabilities have registered from four blocks out of 11 and formed their block-level working committee and many more are in process. The forum has strong presence and is well recognised in the district among government officials for its activities.

5

Advocacy and its Impact

- i. Advocacy efforts resulted in the formation of a Core Committee of Chittorgarh cataract free mission and DHS
 - a. It is a group which would focus on Chittorgarh eye care area and also be responsible to review and plan activities for the whole district.
 - b. Sharing the Project Implementation Plan (PIP) and other information with the district administration in time for further recommendation or advocacy at the state level.
 - c. Earlier DHS have not included the agenda of blindness in their meetings' agenda, but after a long advocacy with the district administration the agenda has been incorporated in the meeting on regular basis and also reviewed on a monthly basis.
- ii. Develop the district PIP as per NPCB guideline
 - a. Core committee is responsible to develop the district annual plan and review the same and fix the future strategy/roadmap.
- iii. Develop effective and replicable referral mechanism in PPP mode
 - a. CUTS set up three vision centres during the project intervention in public private partnership (PPP) mode in Chittorgarh district. All vision centres are established at

CHCs. 11 vision centres are in the process of establishment in the district.

- b. Along with ASHA training, CUTS conducted school teachers' training on eye screening through E-chart so that at the time of admission of each child eye screening is done by the teacher, and if required, referred further for counselling, eye testing, refractive error or treatment. Through this process, eye screening of 2445 students were done and 700 spectacles distributed to the children by CUTS.

iv. Strengthening the district hospital

- a. When CUTS initiated the project in July 2009, there was only one ophthalmologist in the district hospital with no supporting staff. According to the district hospital data, 50-60 cataract operations were conducted annually. But after a two-year long and effective advocacy, there are three full time ophthalmologists and advanced machines. Training is also provided to doctors. The hospital now carries out 500-600 operations annually. Community referral mechanism is expected to further improve the situation.

In this whole process, CUTS and Sightsavers advocated at the district and state level based on data available. State NPCB also applauded the efforts by CUTS and Sightsavers in the area of eye healthcare in Chittorgarh, especially replicating PPP model of vision centre.

Project Coverage in Media



Disability is not Inability: Mainstreaming Persons with Disability

Glimpses



SHG meeting



Training of Persons with Disability



World Disability Day Celebration



White cane distribution to blind children



Visit from Sightsavers



Education of blind child



Blind persons at MNREGA site



Blind persons weaving chairs



Disabled girl teaching tailoring



Access audit of Gram Panchayat
Bhavan



Celebration of white cane day



Visually impaired children in skill
development camp



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