



PARIVAAR

PARIVAAR

26th

Annual Report
2021 - 2022

National Confederation of Parents'
Organizations for Persons with Intellectual
and Developmental Disabilities

National Safi Convention 2022



Regional Parents Meet & Awareness Programs





ANNUAL REPORT 2021 - 2022

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PARIVAAR EXECUTIVE COUNCIL - 2019 to 2022



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Name	Designation	Tele. No.	Email	City	State	Zone	Parent Organization
Cdr. Shrirang N. Bijur	President	7387625555	sn_bijur@rediffmail.com	Pune	Maharashtra	West	AWMH
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Mrs. ChaitaliGami	Zonal VP - East	9830411480	chaitali.gami@yahoo.in	Kolkata	Bengal	East	South Kolkata Parasmoni
Mr. SukumarM.	Zonal VP – South	9446257547	sukumangalassery@gmail.com	Wayanad	Kerala	South	Wayanad Parivaar
Mr. Sudeep Goyal	Zonal VP – Central	9414036896	sudeepgo@rediffmail.com	Navalgarh	Rajasthan	Central	Asha Ka Jharna
Ms. Belbora Wankar	Zonal VP – North East	8794349030	bellbora2014@gmail.com	Shillong	Meghalaya	NE	Meghalaya Parent Assoc
Mr. Mangal Singh	Zonal VP-North	9216913015	mangalsinghkk@gmail.com	Amritsar	Punjab	North	Anmol Parents Assn.
Major Sudhakar Pillai	Gen. Secy	7994359199	pvrncpogensec@gmail.com	Palakkad	Kerala	South	Parivaar Palakkad
Mr. Bhanuprasad Chauhan	Treasurer	9898594350	bprasad1655@yahoo.com	Gandhinagar	Gujarat	West	Sadhana PA
Mr. Abhay Kumar Dubey	Zonal Secy – Central	9425150672	abhaydubeyjb@gmail.com	Jabalpur	Madhya Pradesh	Central	NVAS
Mr. Sanjeev Kumar Jha	Zonal Secy – East	7717786596	Jha_sanjeev1972@rediffmail.com	Ramgarh	Jharkhand	East	BhawishyaKiran
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Ms. Supriya De	Zonal Secy– NE	9366936335	abhoymission@rediffmail.com	Agartala	Tripura	NE	Abhoy Mission
Mrs. Ranoo Banerjee	Jt. Secy	9810926735	ranooabanerjee@gmail.com	Delhi	Delhi	North	Muskaan
Mr. Amarjit Singh Anand	Member	9417006059	amarjitsinghanand@gmail.com	Jalandhar	Punjab	North	Chaanan Assn.
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Mr. Soumen Upadhaya	Member	9434086363	soumenupadhaya1@gmail.com	Kolkata	Bengal	East	Behala Bodhayan
Mr. Mohd Mushtaq Ali	Member	9703331622	pawmencap@gmail.com	Hyderabad	Telangana	South	pawmencap
Mr. Nabrun Sengupta	Member	7002551552	hinsengupta@yahoo.co.in	Shillong	Meghalaya	NE	Meghalaya PA
Prof. K. Koyatty	Member	9847110100	prof.koyatty@gmail.com	Kozhikode	Kerala	South	Kozhikode Parivaar
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Mr. B.N. Rathi	Member	9822060075	bnrathiji@gmail.com	Aurangabad	Maharashtra	West	Navjeevan
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Ms. Poonam Lal Chaudhary	Member	9815341361	swayammohali@gmail.com	Mohali	Punjab	North	Swayam
Mr. Kartik C Pandab	Member	9438187899	shraddha.ra@gmail.com	Rourkela	Odisha	East	Shraddha
Mrs. Amanpreet Kaur	Member	9815258580	randev.nsm@gmail.com	Taran Taran	Punjab	North	Smarapan Soc.
Mr. Siddhartha Sankar Mukhopadhyay	Member	9830017416	siddhartam123@gmail.com	Kalyani	Bengal	East	Kalyani Life
Mr. P. Baburao	Member	9431372214	Pamhj361@gmail.com	Jamshedpur	Jharkhand	East	PAMHJ
Mr. Dashrath V. Parab	Member	9322287447	dashrath.parab61@gmail.com	Navi Mumbai	Maharashtra	West	Swami Brahmanand PA
Mrs. Deepa Chowdhary	Member	9934523571	koshishparent@gmail.com	Ranchi	Jharkhand	East	Jharkhand PA
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Mr. Santhosh Kumar	Member	9746194984	asanthoshwarrier@yahoo.com	Thrissur	Kerala	South	Thrissur Parivaar
Mr. Vikas J. Khalatkar	Member	9049639779	vikas5461@yahoo.in	Nagpur	Maharashtra	West	Sweekar



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Name	Designation	Tele. No.	Email	City	State	Zone	Parent Organization
Mr. H. P. Sharma	Member	9425539703	harihar_kbe@yahoo.co.in	Korba	Chhattisgarh	Central	Samarth
Mr. Subash Rawal	Member	9850566843	rawal2304@gmail.com	Pune	Maharashtra	West	Umed Parivaar
Mrs. Pushpa R Shirke	Member	7222963855	snehsampadashirke@gmail.com	Bhilai	Chhattisgarh	Central	snehsampada
Mr. Baikuntha Bihari Mohanty	Member	9437075921	jagrutibbsr@gmail.com	Bhubaneswar	Odisha	East	PASSOMERC
Mr. Sabya Sachee Samal	Member	9437083471	hope.rajgangpur@gmail.com	Rajgangpur	Sundargarh	Odisha	East Hope
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Mrs. Madhuri Sood	Member	7018597842	pin2sood@gmail.com	Shimla	Himachal Pradesh	North	Udaan
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Mr. Shantidevbera	Ex. Officio Secretary Safi	9433471679	selfadvocatesforum@gmail.com	Kolkata	Bengal	East	SAFI
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Mrs. Iona Kundu	Technical Advisor	9831004412	mentaid.org@gmail.com	Kolkata	Bengal	East	Mentaid
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Mr. GS Panda	Technical Advisor	9437194908	dappwd.india@hotmail.com	Subranpur	Odisha	East	DAPPWD
Mr. SribasDhar	Technical Advisor	9435144104	sribasdhar@rediffmail.com	Guwahati	Assam	North-East	PASS



PARIVAAR –National Confederation of Parents’ Organizations

Parivaar was formed in the year 1996 as a National Federation of Parents Association with 22 Parents Associations as its member. Today it has 306 parent organization as its members. Parivaar works and advocates to empower and secure rights of **Persons with Intellectual and Developmental Disabilities (PwIDDs) comprising of Intellectual disability/ MR, Autism, AHSD, Cerebral Palsy, Multiple Disabilities**. Parivaar also hand holds parents and parents’ organizations by sharing experiences and best practices, and creating awareness about government schemes. Parivaar also practices community based inclusive development (CBID) to inculcate Self Advocacy among PwIDDs across out the country.

VISION

To empower, secure rights & improve the quality of life of persons with intellectual and developmental disabilities & their families in the country.

MISSION

Advocacy, Awareness, Sensitization & creating an Inclusive environment for and on behalf of persons with intellectual & developmental disabilities & their families in the country.

MAIN OBJECTIVES

To plan, advocate and execute strategies for:

- Building parents network across India.
- Building Self Advocacy Forum of India across the country.
- Collaborating, coordinating & networking with NGOs & other cross-disability organisations
- Collaborate with policy formation level of government and implementation agencies of state and local governments for effective empowerment of grass root beneficiaries - Persons with intellectual & Developmental Disabilities (**PwIDDs**) & families
- Advocating for equal opportunities, social justice and human rights of PwIDDs with government and community.
- Sensitizing the Community, Service providers and officials of the local government towards the rights of PwIDDs.
- Support and grow the no of member organization to plan and implement rehabilitation of PwIDDs, especially after demise of their parents.



REGISTRATIONS

Registered under Society Registration Act 1860 : **S 30635/1996 – Delhi**

Registered under Section 12A of IT Act : **AAJAP0212DE19979**

Registered under Section 80G of IT Act : **AAJAP0212DF20082**

PAN : **AAJAP0212D**

Registered under FCRA Act 1976 : **Rag No 231660416**

Registered under PwD Act 1995 : **Registration no 022 SI NO 251 dated 29th July 2016**

Registered with Niti Ayog DARPAN Unique ID : **MH/2021/0275398**

Registration by Dept. of Company Affairs : **CSR00009500 at 22-06-2021 for CSR donation**

ADMINISTRATIVE OFFICE

A-24, Green Acres CHS, Salunke Vihar Road, Kondhwa, Pune 411048

Tel : +91 7387625555 Email : parivaarncpo@gmail.com

EXECUTIVE OFFICE BEARERS: 2019-22

Cdr. Shrirang Bijur – President

Major Sudhakaran Pillai - Gen. Secretary

Mrs. Chaitali Gami – Zonal VP East

Mr M Sukumaran – Zonal VP South

Ms Belbora Wankar – Zonal VP N-East

Mrs. Ranoo Banerjee – Jt. Secretary

Mr Sanjeev Kumar – Zonal Secy. East

Mrs Pooja Patel – Zonal Secy. West

Lt Col Dr V K Gautam – Past President

Mr Bhanuprasad Chauhan – Treasurer

Mr Mangal Singh – Zonal VP North

Mr Sudeep Goyal – Zonal VP Central

Mr P.S. Burde – Zonal VP West

Mr Abhay Kumar Dubey – Zonal Secy. Central

Mr Vijay Shah – Zonal Secy. North

Mr Supriya De – Zonal Secy. North-East

Mr V Rusheeswara Rao – Zonal Secy. South



P A R I V A A R
NATIONAL CONFEDERATION OF PARENTS' ORGANIZATIONS

For Persons with Intellectual and Developmental Disabilities

ANNUAL REPORT: 2021 - 22

The President and Office Bearers of Parivaar are pleased to present 26th Annual Report covering activities till Sept 2022, along with Audited Statement of Accounts for the financial year 2021 - 22.

The year 2021 -22 has been an extraordinary year in terms of opportunities and challenges. The year brought in digital innovations both in reaching out to Parents and Persons with **Intellectual and Developmental disabilities (IDD)**, and in the creation of contents by professionals, trainers and volunteers. Parivaar joined in this digital revolution too, and was able to keep mass contact with parents and Persons with IDD, and provide valuable information among the parents all over India. We also made use of hybrid meetings with ministries and government departments (center and states) to supplement our advocacy efforts without having to undertake too much of travel. The pandemic time also brought out challenges for parents in vaccinating, hospitalization, sanitization and maintaining well-being of self and family. There were also instances of abuses/ denial of rights to persons with IDD where Parivaar intervened by raising it with national authorities for immediate relief and long-term avoidance of such incidences. We consolidated the learnings arising out of the two tough pandemic phases, and provided further training & support to persons with IDD, parents & their families and organizations. Parallely Parivaar also obtained support from funding agencies and CSR to provide critical support of groceries, sanitization kits and medicines to families of IDD during the COVID-19 time.

1. Advocacy: We constantly advocated at Department for Empowerment of Persons with Disabilities, and also with Ministries of Education, Health & Family Welfare, Skill Development, Women & Child Development, Civil Aviation, Finance, and host of National organizations. In addition we approached agencies such as PMO, NHRC, NCPCR, NCW, NALSA, CCPwD/ GOI and CPwDs/ states for legal and penal recourse for protecting the rights of persons with intellectual and developmental disabilities. The advocacy efforts have been ongoing with relentless efforts; be it on difficulties faced by parents in registration and claims in Niramaya, or making Mission Vatsalya more relevant to children with IDD living in juvenile homes, and taking up issues with authorities whenever rights of children or adults with IDD are trampled upon. In addition, PARIVAAR also provided inputs for policy formation wherever it concerned persons with IDD in particular and persons with disabilities in general. Some advocacy initiatives are:

- a. Additional facilities required for persons with IDD during vaccination and hospitalization
- b. Making Digital Education inclusive for students with IDD
- c. Special requirements of accessibility for Passengers with ID and Autism in airport, transit and during the flight
- d. Follow-up and monitoring required from the National Trust to ensure safe custody of assets and property of persons with IDD, looked after by the guardian
- e. Building capacity to facilitate employment of parents/care takers of persons with IDD as Community Based Rehabilitation worker



- f. Recommendations on Mission Vatsalya to take care of special requirements of Children with IDD living in Juvenile homes or Orphans.
- g. Recommendations for incorporating special requirements of persons with IDD in the draft National Policy
- h. Recommendations for preparing Visualize India in years 2030, 2040 and 2047
- i. Inputs on the draft national strategic framework for Assistive technology in respect of persons with IDD
- j. Critical support required for persons with IDD to engage in livelihood/ employment

2. Awareness Generation : The pandemic time took its toll on National and Regional Parent Meetings being held by PARIVAAR in collaboration with the National Institute for Empowerment of Persons with Intellectual Disabilities (NIEPID). However pandemic time could not stop Parivaar from continuing with Awareness Generation activities which are fundamental to advocacy and support parents to avail prevailing schemes, and parents doing what is in the interest of their persons with IDD. During the pandemic time most parents have become media savvy. Therefore, we continued with Zoom sessions on variety of subjects for parents and community. The Parivaar leaders also voiced their breakthroughs in services provided to persons with IDD, achievements and best practices in Parivaar whatsapp groups. We encouraged leaders in the group to share it with other groups consisting of parents of their organizations. Similarly, judgements of courts that consolidate on the rights of Persons with Disabilities are widely shared for state leaders to take advantage of it in the respective states, and also to ensure that the relevant department gets aware to implement/ incorporate it in their working. Parivaar's monthly eNewsletter has gained popularity as a reference for important court orders, administration/ govt. orders, international happenings in disability sector. Parivaar also publishes important events of member organizations in pictorial form to encourage members to share their best practices. The writing from President's desk is also valued by many members who look forward to read it every month.

The first RPM (post pandemic) jointly conducted at Vashi, Navi Mumbai, by Parivaar-NIEPID-Shayadri Parivaar - ETC on 15th & 16th October 2022 had tremendous response from the parents. The participation approached 300, much beyond our expectation. The next RPM was held at Silchar, Assam, with participation from districts of Karimganj, Hailakandi, and adjoining areas of Manipur, Tripura and Meghalaya. The highlight at Silchar was the presence of large number of district officials mandated by the Dy Collector to get sensitized about the special needs of persons with IDD. The technical sessions and follow-up discussions in both RPMs were much appreciated, The Vice Chancellor of Assam xxxxxxxxx it now exploring to plant a special education dept, as a result of interaction during RPM.

3. Self Advocates' Network and Activities : The Self Advocacy efforts have kept pace with time during the year with the involvement of corporates who held coaching classes digitally. Themes such as Self-advocacy, English speaking, Personality and Grooming were discussed and zoom sessions held periodically where many Self advocates and their mentors participated. In addition, mentors' training, self-advocates' coaching was taken up aggressively during lock-down period by digital means and later by physical participation in many states. This has continued in five states as part and parcel of preparing persons with IDD for livelihood activities and employment.



The first public function by Parivaar after the pandemic time was National Safi Convention held on 7th & 8th May 2022 at Palakkad, Kerala. In spite of some travel restrictions, the Self advocates from 10 states attended the convention at Palakkad and made the most of it. It was a very interesting and successful National Meet. A report on National Safi Convention is appended at Page 12 after this report.

In addition, Parivaar collaborated with National institutes to hold special sessions for PwIDDs. Our collaboration with Cognizant continued to provide training of interest to Self-advocates digitally.

4. Inclusive Livelihood Project Supported by CBM India: Parivaar has been conducting Mentor training for self-advocates. These mentors have trained thousands of persons with IDD to graduate as Self advocates. Going forward we realized that true dignity and purpose in any adult person's life comes when he/ she is engaged in livelihood activities. Therefore we convinced CBM to start a Inclusive Livelihood project to showcase potential of Self advocates.

Employment of persons with intellectual disabilities is a trail blazing pilot project in five states of India and amply proves that the persons with intellectual disabilities are capable of earning their livelihood and live with dignity and purpose. The project, therefore, will be a hall mark in overcoming discrimination against persons with intellectual disabilities and recognition of their capacity. Further families of persons with intellectual disabilities will be able to get over the prevailing social prejudices. The project has achieved the following positive changes in the lives of these beneficiaries within the half-way time frame of the project:

- Two-hundred and fifty Persons with intellectual disabilities are trained as self-advocates and undergoing on-job-training for livelihood activities (50 persons each in five Circles – one circle each in Odisha, Jharkhand, Madhya Pradesh, Rajasthan and Maharashtra)
- Showcase capacity and capability of persons with intellectual disabilities to get employed and remove social biases against their inclusion.

Parivaar has carefully planned this program to act as a pilot to demonstrate that given much needed soft skill based training (self advocacy training) and inclusive social environment the persons with intellectual disabilities are capable of earning their livelihood and lead a purposeful life.

When we started the project in 2021, the state of education, training and employment of PwIDDs in rural/ semi-urban area in the five project states was indeed disappointing. During the baseline survey the existing status of persons with disabilities in the project blocks/ circles was as follows:

Parameter	Status in %
Self-advocacy trg. For building self confidence, daily living skill, communication & team interaction etc.	0%
Vocational skill for engaging in livelihood or self-employment	0%
Livelihood/ Employment	3%
(a) Open employment including in MG NREGA or poverty alleviation schemes– 0%	
(b) Livelihood engagement in own, family, SHG enterprise – 3%	



Table of statistics from baseline survey

Today during the mid-term of project the state of affairs in livelihood and employment has taken a commendable turn, as indicated below.

Parameter	Status in %
Self-advocacy trg. For building self confidence, daily living skill, communication & team interaction etc.	100%
Vocational skill for engaging in livelihood or self-employment	82%
Livelihood/ Employment (a) Open employment including in MG NREGA or poverty alleviation schemes– 0% (b) Livelihood engagement in own, family, SHG enterprise – 3%	76%

One important lesson that came out is that parents/ guardians of females with intellectual disabilities and most parents of even males have expressed concern regarding safety & security of persons during travelling alone. It seems justified in their given environment. A mentor is not always available and neither it is cost and time effective for the mentor to travel to & from with Self advocate every day. Therefore, in the project review we changed our strategy and decided to place the persons with intellectual disabilities in livelihood/ employment in close proximity of their family.

Two of the many success stories of the project are described at Page XX

5. Supporting Parents/families of persons with IDD during the lock-down:

In July 21 CBM sponsored 1050 grocery/ ration kits and sanitization kits for distribution to families of children with intellectual disabilities affected economically during the pandemic. These were distributed in Aug-Oct 2021. The above distribution of relief supplies are in addition to the ration distributed during/ after 1st phase of pandemic, whose details were covered in the last Annual report. Parivaar members also advocated vigorously with local authorities for priority vaccination of persons with disabilities, their care takers & families. Parivaar members advocated at State governments' level as well as with Zilla Parishads, District authorities, Municipalities, Hospitals and Vaccination camps. One of the Parivaar senior leaders Shri Amarjit Singh Anand was appointed as state coordinator in Punjab to facilitate priority vaccination to Persons with disabilities.

6. Amendment of Original Parivaar Constitution: We had taken up amendment of Parivaar Constitution that was adopted in 1996. Much progress was made during the year 2020 – 21 to finalize the amendments after due consultations with parent/ parent organizations. We followed up on the amendment of Parivaar's constitution both internally and externally. The finalized version along with all documentation was submitted to DM, New Delhi, for approval and being closely tracked.

7. Executive Council Meetings & Administrative Committee Meetings : Three meetings of Executive Council meetings took place during the year where important subjects were discussed and directions



given for advocacy, awareness and operational subjects. Parivaar also formed an Administrative Committee based on recommendation in the amended constitution. The administrative committee has 10 members consisting of President, Past President, six Zonal Vice Presidents, General Secretary and Treasurer. During the year 2022 the administrative committee met every month with over 80% average attendance of members.

8. Parivaar National Awards : It was decided during Annual General Council meeting of 2020 that the National awards constituted by Parivaar be awarded during the 1st NPM held after lock-down. Accordingly, the awards for years 2020-21 and 2021-22 will be conferred at NPM – 2022. The following are the awardees.

Rita Peshwaria Menon and Smt. Premlata Peshwaria Memorial National Award

For year **2020-21** winner is **Jharkhand Parents' Association**, Ranchi

For year **2021-22** winner is **AWMH, Maharashtra**, Mumbai

Smt. Bhagwati Devi & Pt. Manasram Gautam Shahji (BDMGS) Memorial National Award

For year **2020-21** winner is **Suhit Jeevan Trust**, Pen (Raigad district)

For year **2021-22** winner is **Pehla Kadam – Narayani Charitable Trust**, Dhanbad

The awards for the year 2022-23 will be announced during Annual General Council Meeting on 11th Nov 2022.

9. The National Trust Elections : There were elections held by The National trust for electing its board members. All three parent members nominated by Parivaar for election were elected. We also made a beginning by nominating members for RO group where our members received good voting response but not good enough for getting elected. In return we learnt valuable lessons on electioneering for National trust board.

10. Statutory Compliances : The year 2021-22 is noteworthy for statutory compliances undertaken by Parivaar. This included IT returns to report details of each donor and to ensure utilization of donations strictly for the purpose for which they are given. In addition, Parivaar also undertook to make up for anomalies in its compliances. These compliances created some disruption, especially in FCRA activities, but all compliances were completed on time. The compliance action was in the following areas:

- a) Copy of Original MOA and Parivaar Constitution was obtained from the Registrar Office, New Delhi and amendment to constitution has been submitted to DM, New Delhi, for approval.
- b) New FCRA bank account was opened as per the directives of MHA. The new bank ac is in State Bank of India, New Delhi Main Branch.
- c) Approval u/s 12AB under Income Tax has been received.
- d) Approval u/s 80G under Income Tax has been received.
- e) Form 10BD for donations/ grants received were received for FY 2021-22 after filings on time, and provided to donors.



- f) Application for renewal of FCRA registration was filed and queries for copies of additional documents replied satisfactorily. Pending approval of renewal application, the MHA has extended FCRA registration till 31st March 2023.
- g) New bank account with new PAN no is opened in HDFC bank with online banking facilities. All FDs have been transferred to HDFC bank. The existing accounts in Canara bank will be closed.

11. Accounts and Audit Reports : We continued to maintain our accounts as per statutory as well as CBM requirements. All quarterly reports to CBM to indicate progress of project and fund requirement for next quarter were filed on time. The annual audits were conducted for calendar year ending 31st December 2021 for reporting to CBM. Thereafter the financial year end audit was conducted for year ending 31st March 2022. During both audits the auditors also prepared funds utilization report for the verification by CBM. A copy of report along with consolidated accounts for the FY ending 31st March 2022 is provided at the end of this Annual Report.

12. Our Benefactors : Parivaar wishes to thank CBM for supporting Community Based Inclusive Livelihood Project in the states of Maharashtra, Rajasthan, Madhya Pradesh, Jharkhand and Odisha. This will be a trend setter project for livelihood and employment of Persons with intellectual disabilities in rural/ semi-urban areas in India. Parivaar also thanks Sumitra Ramarao Nagarkatti Foundation for generous donation to nullify outstanding from RPM partner. Finally, Parivaar conveys its sincere gratitude to Mrs. Anjali Bijur for leasing out her spacious flat to Parivaar office for the last six years @ Rs 1/ month.

At the end I on behalf of Office bearers of Parivaar wish to thank all member organizations, affiliate members, professionals and Persons with Intellectual and Developmental Disabilities for their whole hearted support, guidance, encouragement and volunteer work.

Thank you, and best wishes

Cdr Shrirang Bijur (Retd.)
President, Parivaar

29th October 2022



REPORT OF SIXTH NATIONAL CONVENTION OF SAFI

Date: 7th & 8th May 2022

Venue: Yuvakshetra, Palakkad, Kerala

The Sixth National Convention of Self advocates' Forum (SAFI) was held at **Yuvakshetra College of Management Studies, Ezhakad, Palakkad, Kerala** on 6 & 7 May 2022. The convention was supported by Parivaar National Confederation of Parents' Organizations, and CBM and hosted by Parivaar Kerala.

The convention was attended by 104 self advocates across the country. They were accompanied by 66 mentors, escorts and parents, totalling 170 participant delegates. The highlight of this convention was that about 90 % of the self advocates and parents & escorts were first timer. The convention proved to be a great success in respect of building confidence among the mentors, providing them a forum to raise their voice, life skill activities, exposure to outstation venue and knowledge tours. The team Kerala spared no efforts to plan the convention meticulously involving their Self advocates at every stage.



Day One: 7th May 2022:-

The Convention took off with flag hoisting by Ms. Aditi Verma, President, SAFI in the presence of Cdr Shirang Bijur, President, Parivaar, Mr Jay Kumar of CBM India Trust, Shri P S Burde, National Coordinator, SAFI, Major Sudhakar Pillai, Chairman, Organizing Committee, Shri M P Karunakaran, President,





Parivaar Kerala, Shri P Zikkander, Kerala State Coordinator, SAFI and self advocates, mentors, escorts and parents. Delegates moved to the auditorium in formation while Self Advocate delegates holding placards showing slogans about their rights.

Inauguration:

The convention commenced with lightning lamp followed by prayer by Mr Kiran a self advocate from Trissur. The inaugural session chaired by Ms Aditi Verma, President, SAFI was inaugurated by Shri S H Panchapakesan, Kerala State Commissioner for Disabilities. Rev. Dr. Mathew George Vazhayil, Director of Yuvakshetra, Cdr Bijur, Shri Jaykumar of CBM were the guest of honour.

Major Sudhakar Pillai, Chairman, Organising Committee welcomed the delegates and briefed about the two day event. He said that it's a matter of pride for Parivaar Kerala to have such National event. He explained about the activities to be performed during next two days of the convention.

The Shri Panchapakesan, Chief Guest, emphasized the need to create awareness about rights of persons with disabilities among government officials and public. He also highlighted some of his important judgements given by him in respect of Guardianship under the National Trust Act and also about vehicles at concessional rates/ exemption of GST. He also advised that the convention should pass resolution highlighting their main requirements.



Cdr Bijur elaborated on the livelihood projects being implemented in five states of Odisha, Jharkhand, Madhya Pradesh, Maharashtra and Rajasthan with support from CBM. He said that the self advocates and their mentors belong to economically weaker section from rural area and Parivaar endeavour is to make these self advocates self-reliant and independent.



Shri Jayakumar of CBM appreciated Parivaar for taking up skill building and livelihood activities along with Advocacy and self advocacy. He wished success to the convention and hoped that this would result in building awareness among the communities.

Miss Aditi Verma in her presidential speech gave a brief about SAFI, how SAFI is evolved from a small group of self advocates in 2008 to a National Organization in 2022 after 14 years. She described how RPD Act, 2016 paved the way for SAFI to get an independent status. She mentioned that SAFI has fulfilled all the legal compliances.

Rev.Dr.Mathew George Vazhayil, Director of Yuvakshetra also spoke on the occasion.

Ms. Sreevidya of SAFI Kerala proposed vote of thanks.

General Assembly of SAFI :

The inaugural session was followed by General Assembly of SAFI with Ms Aditi Verma in the Chair. Ms. Sonu Maru, Vice President, Mr. Abhishek Inamdar, Joint Secretary, Mr. Deepak R, Treasurer and Mr Vishal from Kerala, SAFI as special invitee were on the dais. After welcome address by Miss Aditi, Shri Abhishek presented the Annual Activities



Reports of SAFI for the year Nov 2019 to March 2020, 2020-21 and 2021-22. Mr. Jobin C George presented Annual Report of Kerala chapter of SAFI.

The livelihood project is being implemented by Parivaar in five states of Jharkhand, Madhya Pradesh, Odisha, Maharashtra and Rajsthan with the support from CBM. Over 50 self advocates in each state are engaged in the project. This is a three year project for the period from Jan 2021 to Dec 2023. A team of Self advocates from each of these states attended the meeting along with their trainers/mentors. Self advocates from each state presented the progress report of the project and explained how far they have reached in their endeavour. Some have presented with the help of PPT and charts.

The theme of the sixth convention was "Inclusion Means". President SAFI opened the stage for self advocates to speak on the theme.

Some of the self advocates came forward and spoke on the theme. Among the prominent who spoke was Ms.Aisha Hanna. She said we, persons with special needs, face discrimination everywhere. The attitude of the society should change to overcome this. Parents on their part should not shy away from the society which will further dampen our chances.

The following Resolution was unanimously passed:

Resolution : The Rights of Persons with Disabilities Act was passed in 2016 but many of the Central and State Governments are still not implementing the job reservation as stipulated u/s 34(1) of the Act. The Government of India and all the State Governments and Local government bodies should ensure that PwIDD get their due share under the 1% job reservation as provided in the RPD Act, 2016.

The Annual General Council came to a close at 1.45 PM and the delegates dispersed for Lunch. Mr Vishal proposed vote of thanks.

Life skill Learning Activities:

Post lunch session was life skill activities where self advocates learned various life skill activities like self care, listening skills, critical thinking, managing emotion, self-esteem, self-determination. The session was monitored by Miss Grace Simoes, the resource person.



Cultural Program in the evening:

The Cultural program started with the prayer by Mr Rajeev from Alappuzha. The Program turned out to be a Mega event; in fact, a cross section depicting the diverse culture of motherland. There were dances, both solo and group, songs, drumming, instrumental music and recitation of poetry in different languages. To cap it all, there were dances staged by students of Yuvakshetra College, as part of inclusion, which gave a professional touch to the events. The outstanding feature is that there was no time lag in between the events. There was prize distribution to all Self Advocate performers. The program was nicely conducted by Mr Santosh.

DAY Two: 8th May 2022 :-

After a recap of the first day activities, SAs were grouped randomly and life skill activities of previous day were resumed.

The self advocates were distributed in four teams. Separate sessions for female and male self advocates were held to make them aware about sexist remarks and sexual exploitation and how to protect themselves and reporting mechanism.

There were sessions on social living and adjustments done through role plays and group exercises.

The Self advocates were also trained on time management, punctuality, friendliness, team spirit and managing temper.

Valedictory Function:-

The closing ceremony was graced by dignitaries of the State. Dr. R Bindu, Hon'ble Minister of Social Justice and Higher Education, Government of Kerala, Shri A Prabhakaran, MLA and Smt. Binumol, President, Palakkad District Panchayat, were led to the conference hall by SAs in uniform, holding placards. The gathering was welcomed by Shri P Zikkander, Kerala State Coordinator, SAFI. Her speech in English was

translated into Hindi. Dr.R Bindu gave a brief description of the disability sector of Kerala, activities taken up by the government and various institutions catering to the needs of the persons with disabilities. Incidentally, she also assured voting rights to the Special Kudumbasree ADS and payment of scholarship to PwIDD.

SAFI declaration was read out by Ms.Aditi Verma in English and Mr.Jobin C George in Malayalam.

Shri Prabhakaran, MLA, Smt Binumol, President, Palakkad District Panchayat, Rev. Dr. Mathew George Vazhayil, Director, Yuvakshetra College, Shri Tomy Antony, Principal of the college, Cdr. Bijur, Shri S Burde, Shri M P Karunakaran and Shri Pankaj Maru also spoke.

A memento was presented to Yuvakshetra College by the Hon'be Minister, in token of letting out the entire premises for the Convention, providing the Convention with the services of volunteers. Parivaar Kerala expressed a word of appreciation to the NSS Volunteers of the host college who worked round the clock to make the event a success.



Shri R Viswanathan, General Secretary, Parivaar Kerala, proposed vote of thanks.

Knowledge Tour :-

In the afternoon the delegates were taken to Tippu Fort and explained the historical context and utilities of Forts in general. Next the Self Advocates visited Malampuzha Rock gardens where various art and craft pieces were made out of waste. This was followed by a visit to aquarium where the Self advocates got wide and interesting exposure about variety of fishes and their habitat. It was a good outing as well as a learning opportunity.

The National Safi Convention was a success and meet its objectives. Most of all the Self Advocates had both experiential learning and a forum to articulate their rights and requirements during the two days convention. It also enhanced their worldly exposure, travelling experience and much required mingling with like-minded individuals. In the process they also made new friends and regained confidence. The Self advocates raised their demands before the Commissioner and thereafter with the Minister who responded positively. A resolution was also passed which is being forwarded to the Ministry of Social Justice & Empowerment





INCLUSIVE LIVELIHOOD PROJECT – SOME SUCCESS STORIES

Laxmi Aherwar: Seclusion to entrepreneurship...

Laxmi Aherwar, Age 22 yrs, was born in a scheduled caste family in Mohpani vill, Niwas block, District Mandala, Madhya Pradesh. Her father and mother work as shoe repairer and move across villages to earn living for the family. The family has a small home in the village.

Laxmi was much delayed in her developmental milestones and started walking at the age of 4 years and did not utter a word except “baba”. She was found to be a very quiet child but expressed her basic needs by crying only. At the age of 8 years she was admitted to a government primary school. She remained there for 5 years but did not mix with other children, remained secluded, spoke little and her education attainment level was insignificant. At the age of 12 she was assessed to be a child with intellectual disability, with 60% disability.

She came to Parivaar Livelihood Project, supported by CBM, during the baseline survey conducted by Nishakt Abhibhavak Sangh from Niwas Jabalpur. Laxmi and her parents had extensive discussion with project coordinator and village social worker. Laxmi went through Self Advocacy training which brought about extensive change in her personality. Laxmi started interacting with her peer group after 2nd session and was fully at home and participating from 3rd session onwards. Laxmi would play games, make small conversation, express her preference, put things in order and started socializing in the group. After graduating as a Self-Advocate she was further trained on soft skills (Activities of daily living, greeting people, good touch-bad touch, protecting herself etc.). Even her parents were impressed by her acquisition of social skills and self-confidence. Laxmi also learnt to recognize currency notes, value of items and selling and accepting money.

Laxmi showed her desire to open a small shop in her home where her mother could support her. She became member of Self-help Group facilitated by the Livelihood project. Laxmi received a capital of Rs 5000 and she & her mother used it fully to buy goods for Kirana store. The store was named “Laxmi Kirana Store Mohpani”. Laxmi sits in her store from morning till evening and has been averaging a sale of Rs 400 – 500/ day. She earns around Rs 2000 pm. More significant is the transformed life of Laxmi from a jobless secluded girl to a self-confident earning person with dreams of her own for future life. Laxmi has become a role model in the subsequent Self Advocacy trainings conducted by Nishakt Abhibhavak Sangh. She shows all promise for the progress in future.



Vedprakash: Dependence to a Purposeful life...

Vedprakash, Age 23, belongs to Neem ka Thana tehsil, Sikar district in Rajasthan. He is a person with intellectual disability, since birth. His parents work in brick-kiln as labour. Vedprakash has two sisters, one of the elder sisters was totally occupied in looking after her brother at home. Vedprakash could never be admitted in any school because of parent's pre-occupation with their daily wage work at brick kiln site. Later he was admitted to an NGO run school where he was enrolled till 8th Std. Due to his intellectual disability, he could only attain little numeracy and very basic alphabet writing.

Vedprakash was enrolled in CBM supported Livelihood Project after base line survey by Swami Vivekanand Punervas Samsthan. At that time, he was confined to home while his parents went out to do manual labour. One of his sisters used to look after him. At the start of the project parents of Vedprakash were met by project co-ordinator and they discussed the potential of Vedprakash. Vedprakash was enrolled in Self Advocacy training conducted by Swamu Vivekanand Punervas Samsthan. He showed good potential and excellent fine motor and eyes-hand coordination. Infected Vedprakash was a kind of roll model for other persons with intellectual disabilities attending Self advocacy program. He started communicating pretty well in native Hindi language. He would also talk to peer group and tell them about himself. He showed interest in playing sports/ games, riding a bi-cycle, garden pruning and doing labelling of wares and proved to be a good help in setting up exhibition stalls, etc.

Vedprakash was accordingly trained during the skill building phase, in multiple works. First his currency counting capability was enhanced to counting up to Rs 1000/- money. Thereafter he also learnt to travel independently without being escorted by sister. Some skills in garden hedge pruning, working with others, labelling items etc. The biggest achievement was attaining independence in going out, working and earning livelihood.

Vedprakash works with gardeners, small time contractors, in exhibition stalls and also helping family in their job work when not in such employment

He also started interacting with his neighbouring community. He also socializes at work place and therefore feels less lonely and never agitated. Vedprakash life has moved from loneliness and dependence to a contributing member of family and purposeful member of the community.





APPENDIX A

INPUTS ON THE DRAFT NATIONAL POLICY FOR PERSONS WITH DISABILITIES

The following points are not covered in the draft policy which should be included. These are essential for strengthening the inclusive development of persons with disabilities. From the national point of view some of the below mentioned points also serve to reduce the incidence of disabilities or minimizing the detrimental effect of disability for full and effective participation and inclusion in the society.

The draft policy is fairly elaborate. The text on past achievements and trends need not be included in the policy to make it crisp and concise. The points included in the policy are not appended in this note.

Principles, Vision, Mission

Mission

Collaborate with other ministries/ departments for necessary budgetary provisions and schemes for implementing the provisions of Rights of Persons with Disability Act, in letter and spirit

Recognize role of DPOs and Parent Organizations for collaboration with government including local government bodies while framing and reviewing policies and schemes for persons with disabilities.

Prevention

- 1. Maintain and analyze Database of 4Ds (Defects at birth, Deficiencies, Diseases, Development delays including disability)** collected by Anganwadi/ ASHA workers for all infants by a National/ State Institute for research and analysis, and findings used for forming response at national/ state level to reduce incidence of disabilities at perinatal stage. Pradhan Mantri Surakshit Matritva Abhiyan be suitably modified from time to time at block/district/state/national level and community level to address concerns of rising 4Ds.
- 2. Neo-natal Care and special after care for infants/ children :** This may be reviewed periodically based on the analysis of data on incidence of disabilities among infants coming out of NICUs. There is high incidence of disability prevailing in such babies. This should be analysed based on data from NICUs, disadvantages in after-care prevailing in low-income families, and social customs. Action based on expert advice taking into account inferences on analysis of past data is required to be taken.
- 3. Universal pre-natal tests to detect disability/ defect in foetus to forecast high risk cases and eventuality of disability :** Point of care diagnostics using m-Health mobile van testing will be able to foretell many disability/ defect in foetus. With the advent of 5G telecom services, the pre-natal testing should undergo transformation change using URLLC features for remote diagnostics. Further procedure, based on medical advice and parental choice, should be FREE OF COST, for all pregnant women.



Early Identification

4. **Identify Children at 'high risk' based on 4D data collected by ASHA/ Anganwadi workers and OAE examination of all new born, instead of waiting for the parents to bring their child to centre which results in wasting precious 1 to 4 years of child's critical period.** The parents do not want his/ her child to be categorized as 'disabled' and shall try all home remedies that are based on friendly advice and superstitions. If the child is identified and followed up based on mandated assessment to be carried out in first 6 months, the intervention can start earlier and full use of child's neuroplasticity can be made use of. The child will have huge advantage to achieve his/ her potential.
5. **Unified Early Identification and Intervention database (UEIID) will be developed to address concern of "children at risk" and enabling handshake between the early intervention service providers and families requiring such service for their child.** This database will be used for intimating the parents about nearest govt. facilities available for Early Intervention care. GPS location of nearest early intervention professionals will be also provided from RCI registration database.
6. At present while parents do not understand/ know where to take their child. Most PHCs do not have specialists/ therapists for developmental delays or OTists. And the irony is that Occupational therapists and Special Educators (early intervention) are taking up other professions for want of customers. Such irony can be easily overcome by a GPS type system to indicate availability of requisite specialist in the vicinity of child/ family. Consider the following magnitude of children with developmental delays, and yet the required care givers are not getting to make their both ends meet.
7. RBSK indicate 10% of the children having developmental delays and at risk.
<https://nhm.gov.in/index1.php?lang=1&level=4&sublinkid=1190&lid=583>

Early Intervention (Operating aspects are well covered in draft policy)

8. **Awareness Campaign using social media TV and debates, to inform families about criticality of early intervention therapy for "children at risk".**
9. The awareness campaign should also create awareness regarding mis-leading interventions advertised by unscrupulous elements in the society. The gullible parents are exploited to extract money but it also results in the child not getting required therapy at right age.
10. **Parents' Information & Update for :** The families of children with GDD/DD certification will be regularly provided update on their mobile, about availability of concerned early intervention service and location of service providers via the UEIID system interconnected with GPS. The nearest location of government run facilities [CDEIC/ DEIC/ RHs/ PHCs/DDRC etc.) and private service providers (Rehab./ CBR/ CBID/ Sp.educator/ Therapists/ Psychologists etc) professionals, will be notified on Parents' mobile. The address/ location of private rehabilitation professionals in the vicinity will be updated in UEIID from RCI database of registered professionals.
11. **Including Art, Music, Behavioural therapies, Group therapy for inclusion, Applied behaviour analysis type of therapy for autism, etc. These therapies have proved to be effective for**



children with developmental delays, and can easily be learnt on-the-job and adapted by parents, in addition to paramedical therapies. All UDID, CBR and Special Educators be offered these courses free of charge as distance education short term programs with on-job training in the Early Intervention centres located in student's vicinity.

Disability Certification

1. **Issuance of Global Developmental Delay (GDD) Certificate by age of ONE YEAR:** The certificate will be issued by RBSK to the parents. The accompanying advice will enable parents to receive counselling (by digital means in remote locations), therapy, special diet and medicines along with the special need services.
2. **Issuance of Disability Certificate within 3 months of application for all children who did not get GDD certificate earlier :** Children who have earlier received GDD certificate shall get Disability Certificate automatically after an assessment by age of 6 years. The Children/ persons who have not received GDD and applying afresh will apply online and will be issued certificate within 3 months after due assessment.
3. **The persons with disabilities whose disability is of permanent nature will be issued permanent disability certificate after age of 6 years.** This certificate may be updated from time to time for % of disability based on progression of disability.
4. **Upon issue of disability certificate the concerned person will be provided information pack on Central & State govt schemes, benefits and reservations available for persons with disabilities in general and specified disability in particular. This will be shared online and also on mobile.**
5. **Persons with High support Needs should be issued certification along with issue of UDID,** based on the assessment norms promulgated by DEPWD if the medical board opinion suggests disability require high support.
6. **Issuance of High Support Needs certification without Applicant Having to come to hospital or necessary ambulance facilities are provided by the medical board/ hospital to the affected person:** This certification is often delayed endlessly due to absence of a panel and/ or specialist doctor not being available in the panel. All over the developed countries, persons with severe mobility issues (high support) are issued certificate either at their place or arrangements for special paramedic operated ambulance is provided for to & from residence to hospital.

Education:

The National Education Policy 2020 is fairly comprehensive and taking care of the special requirements of Children with Special needs. These may be incorporated and fully implemented and achieved.

1. **For mainstreaming all children with special needs, it is essential that all schools (special, Inclusive, Integrated) are under administrative control of Department of education and**



NCERT/ SCERT and follow National Education Policy. By keeping the special education under the preview of Ministry of Social Justice & Empowerment and not under Ministry of Education, discrimination against children with special needs is perpetuated at the policy making level. It is apparently against Right to Education Act as well as Section 31 of RPWD Act. The Special schools have no urge to train and move the child to mainstream school. Worst, the children with visual/ speech/language/ physical impairments are also admitted in Special schools clearly flouting Section 16 (v) by the Ministry of Social Justice & Empowerment. It further provides reason for mainstream school not to create facilities u/s 16(v). In developed countries, Special schools are meant for only Children with intellectual disabilities, Autism/ ASD, ADHD, Multiple disabilities. Such children are admitted in Special school after assessing the child to determine his special needs and resources required to address those special needs. Some children attend special as well as mainstream schools and some special schools are attached to mainstream school. All this is only possible if both mainstream and special schools are under same administrative control starting from Taluka/ Circle level upwards. The National Institutes and RCI, under DEPWD, should be mandated to collaborate with NCERT/SECERT regarding curriculum, pedagogy and academics. This is an essential step otherwise the discrimination of a child starts at the time of admission to school itself.

2. **A short awareness & training workshop for parents of all children with special needs is conducted at the time of admission.** The object is to introduce concept of special needs and resources available, assessment criterion, IEP and attainment level priority etc. This is to enable parents to make full use of (if not provided then demand) special resources given by municipality/ ZP for inclusion of their child in the mainstream.
3. **Parent to be encouraged to undergo Community based inclusive education certificate program thru open universities.** As a pre-briefing parents are apprised of training facilities (certificate/ dip/ degree) CBID/ Sp education/ paramedic therapy etc. available on distance education universities/ institutions. During and after the program parents will be encouraged to participate in school activities and undertake home bound program for other children with special needs
4. **Each District and Municipality shall have an Education Coordinator** who will examine special child and recommend special resources required in the mainstream or special school for that child. The Education coordinator will maintain database to follow-up and track attainment level of all children with special needs in the district.
5. **Check points at the end of 1st, 3rd and 5th standard to assess education, social, sports attainment level** and shift from special school to general school and vice versa for meeting special and inclusive requirements of the child.
6. **All children with special needs will undergo foundational childhood care and education, at the school of their choice as per Section 31 of RPwD Act 2016.** This will be achieved by play-based, activity based, inquiry-based, technology based learning with due flexibility as per the special needs of the child. As on date the Children with special needs have dismal admission and retention at primary and secondary level of education. The U-DISE 2016-17 figs quoted in NEP show:



- a. Around 49% of children with special needs never join or leave mid way primary stage of education
- b. Around 75% of children with special needs never join Secondary stage of education
7. **Districts will be declared as (SEZ) Special Education Zones (Section 6.9 of NEP) where ever more than 5% children with special needs remain out of school** Additional budget to be provided for special resources at SEZ for; Barrier free access, additional or one to one teaching resource, suitable learning aids and material, audit of homebased education for its efficiency and student's attainment level,
8. **Free boarding facilities will be available in each district of the country with suitable arrangement for protection & safety of girls.** These hostels will be attached to School complex/ cluster in each district of India. In larger districts there should be multiple hostel facilities.
9. **Introducing digital means of Inclusive education using matching pedagogy and technology devices:** These are Augmentative and Alternate Communication devices (AAC), Learning games, Reading & Comprehension tools, Virtual & Augmented Reality class rooms etc. All Children with high support needs should be able to receive home-based schooling, supported with AI based learning and adaptation devices.
10. **DIKSHA [digital infra and knowledge sharing] will maintain digital library of Contents for Students with Special needs in a National Education cloud.** The contents will suit
 - a. Different curriculums of traditional and open universities offering choice of vocational and academics subjects,
 - b. Life skill & social adaptation related special needs of students with developmental disabilities,
 - c. Catering for different functional level within intellectual and neuro developmental disabilities,
 - d. Age related application-oriented course material,
 - e. Special digital suit for online update of status of education attainment of Students with Special needs.
11. **All Persons with disabilities [Intellectual disability, Autism/ASD] are trained in Self Advocacy to attain self-confidence, incremental level of independence and social adaptation.** The objectives of Self advocacy training for Persons with intellectual & developmental disabilities is to enable their social inclusion. The social inclusion in turn enable them to acquire skills, livelihood/ employment and social acceptance, and finally to lead a life of purpose and dignity. The self-advocacy training for PwIDDs is conducted by trained Mentors who are volunteers from the community.

The training has been recognized by NIEPID & NIEPMD who have also developed necessary expertise and experience. NIEPID in associated with Parivaar - National Confederation of Parents' Organization can roll out Self Advocacy training over the entire country with support of over 300 Parents' organizations associated with Parivaar.



Health and Rehabilitation

1. **The DEPWD shall closely coordinate with MOHFW for**
 - a. **Priority in attendance and treatment for Persons with disabilities in all Hospitals and Health centres u/s 25(1)(c). The govt hospitals must have a board to this effect and staff should be sensitized.**
 - b. **Screen all “at risk” or “Global Developmental Delay” children once a year and identify their special needs and update database**
 - c. **Provision of free medicine, diagnostic services, corrective surgery to persons with disabilities**
2. **Special care to avoid Mental illness** : The Divyangjan are more susceptible for getting into depression/ mental illness therefore more specialist psychiatric care, behaviour therapists and counselling should be available for which helpline will be arranged. The care-givers should be also entitled to avail such help-line counselling facilities.
3. **Special provisions for isolation and hospitalization** to be earmarked for persons with disabilities who require an escort/ care-giver during hospitalization.
4. **Care giver allowance to persons with high support needs** will be provided automatically on issue of high support need certificate.
5. **Niramaya health insurance limits** for each category should be increased progressively (linked to inflation index) and premium should be paid by the state governments.

Skill Development & Employment

1. Recognize Assisted Workshops operated by Parents of persons with intellectual disabilities and render support for upgrading quality and value of products. Exclusive long term skill training programs with active links with market for persons with developmental, intellectual, multiple disabilities and Autism should be enabled by the government. This is guaranteed u/s 19(2)(c) of RPWD Act
2. Vocational livelihood training for persons with intellectual disabilities with a focus on being a useful and productive member of the family/community. To achieve this:
 - a. Inclusion of male persons with disabilities in Self Help Group formation and related benefits under National Rural Livelihood mission and in Urban livelihood mission.
 - b. Priority for job cards and employment for Persons with disabilities in MGNREGA and other employment guarantee schemes and poverty alleviation schemes started by Central and State governments.
3. Set-up digital marketing facility for promoting goods and services by Assisted workshops and Self-help Group promoted by Persons with disabilities, under Open Technology Network program initiated by the Government of India.
4. Recognize employment potential of persons with intellectual and developmental disabilities and earmark jobs u/s 34(1)(e). Persons selected to be deputed to undergo Self advocacy training and arrangement of mentor.



Sports, Culture and recreation

1. There shall be no discrimination in incentive, training allowance, sports scholarship, prize money and state and central government awards, among the Sports person taking part in the different types of Olympic games at International and National level.
2. Sports institutes for Divyangjan in every state linked with Sports stadium and training facilities.
3. The MLAs/ MPs will be encouraged to use 5% of their constituency funds for setting up sports and recreation facilities in their respective constituency.
4. Arts & Music academies will have teachers trained to take care of special needs of
5. A separate wing for Divyangjan Set-up digital marketing facility for promoting goods and extra security for such persons availing the facilities.
6. Every city municipality will be given grant to set up outdoor sensory & science park for Divyangjan's knowledge and inclusion.
7. All tourism destinations in the country shall give preference
8. for allotment of up to 5% of their gate entry free of charge for persons with disabilities and their escorts
9. appropriate universally accessible gadgets and brochures so that there is no discrimination in visitors' experience for persons with disabilities.
10. Exemption on GST and local taxes for purchase of vehicles and its annual insurance, to be used by Person with disability/ escort for enabling access to education and livelihood.
11. Travel concessions by central govt and state government transporters for persons with disabilities and escort.

Disaster management

District disaster management teams will be sensitized on disability specific requirements and training on basic communication requirements of Hearing impaired, Blind and Autism/ Intellectual disabilities will be provided to all workers.

Accessibility

An Accessibility Index will be developed for buildings on the line of LEED rating system. The Accessibility index will be also made part of all building rating systems in the country.

Accessibility requirements will be built into Development Control Regulations (DCRs) and Building regulations of all states

All public spaces [city areas, markets, recreation, religious, social, sports stadia, recreation areas/ parks etc.] will be accessible to all persons with disabilities.

All means (public/ private companies) of transports [school buses, road, rail. Air] will be disability friendly, for accessing as well as for transit & hubs' use. Applicable for all local, state, national, international transportations.

Capacity Development in Rehabilitation sector

1. **Group homes for Persons with Intellectual disabilities in Inclusive Housing set-up (2030) :**

The majority of Persons with intellectual disabilities are unable to live independently and require daily living support and financial resources to make both ends meet and live a dignified life. This becomes a dire need when parents are no more or unable to accommodate the person with intellectual disability due to their growing age or lower economic status. The government should provide support to NGOs and include this need in CSR norms, so that large number of well managed group homes come-up to address this requirement. At present there are only ill maintained juvenile homes and very few govt run residential centres which cannot meet the requirements. The result is that many persons with intellectual disabilities or with Mental illness become homeless and exploited out of their legal capacity as well as dignified existence. The government should use special funds u/s 86 & 88 to fulfil legal capacity and requirements for safe and habitable living for such persons as also enshrined u/s 15 and 24(3). These residential centres should be handed over to Parent Organizations/ NGOs for operation.

2. **Availability of Truly representative data on disability based on Functional Incapacity for the national population available.** By 2040 the demographic shift in age profile of population in India will be visible. The percentage of senior citizens with higher life expectancy will require enabling them to lead a comfortable and independent life. For such planning to be initiated & implemented the concept of disability will have to change from medically assessed (as at present) to also including functional disabilities at old age. India should start following ICF (International classification of functions) to obtain figures on functional disabilities. The method of census and surveys to obtain figures for planning will have to be modified and on-line methodology for collecting data on Functional disabilities will be initiated. The Washington Group of disability survey (part 1 and 2) will be fully operationalized. As on date most advanced countries follow this methodology to arrive at figures for planning purposes.

3. **The Development Plan [DP] approved for cities shall cater for special requirements/ reservation of adequate space for development of rehabilitation centres, group homes, special schools and assisted workshops.** This provision should be included in DP regulations of Central and State governments.

4. **A governance system at district level (in the line organization) to monitor the rights, entitlements and meeting the special needs of Persons with Intellectual disabilities (2030).**

a. **Developmental Delays & Disability Coordinator (NDD) District Coordinator— For children aged 0 to 3 years, under RBSK**

I. Data collation from all ASHA & Anganwadi sevikas to track each individual child with global development delays.

II. Tracking developmental milestones of all premature births and infants requiring incubation

III. Global Developmental Delay (GDD) grouping for the children based on 4Ds incidence reports within 6 months of birth.

IV. Early Intervention services [therapeutic, diet, medicines/ surgeries, for special needs of the child



- V. In case the child persists with GDD then issue GDD certificate with time of validity as approved by specialist
- b. District Education Coordinator for Divyang from 4 to 18 years age under SSA & NEP**
 - I. Will identify children with special needs and the extent to which they are met, by conducting district wise survey u/s 17 (a)
 - II. Will monitor progress of education attainment level of all Divyang students in the district u/s 16 (vi), (vii), (viii) of RPWD Act
 - III. Will identify special needs of every such student and provision it as per requirement u/s 16 (iii) & (iv)
 - IV. Will be responsible for schooling of all Divyang students in the district; for inclusive and special education
 - V. For Home based education for students with disability having high support needs
 - VI. For Special education for Divyang students with such special needs in an integrated manner
- c. District Divyangjan Rehabilitation Coordinator for 18+ Divyangjan**
 - I. Awareness & sensitization of communities to enable social inclusion of all Divyangjan in the district.
 - II. Follow-up on employment for Divyangjan in government, public sector and private enterprises as per RPwD Act and volunteer bases
 - III. Development of Divyang youths in skill building programs in the district
 - IV. Coordinate participation of Divyangjan in state schemes for Livelihood and employment
 - V. Coordinate district local level committee for enabling enjoyment of full legal capacity and inherited assets with the provisions of guardianship.
- 5. Teachers' Training Curriculum to include three subjects concerning Disability & Education empowerment.** Every teacher training degree or diploma program must have following three subjects. The list is not all inclusive:
 - a. Different types of disabilities and their special requirements
 - b. Development of pedagogy and support measures in the Class-room to meet the special needs.
 - c. Configuring education apps for Slow learners and those with special needs. This will be a practical/lab subject.
- 6. Topics/ Subject on disability included in all organizational training modules :** A topic or subject covering Disabilities, Inclusion, Social empowerment etc will be compulsorily included in every training program meant for officials and employees of Central & State Governments, Public sector, Private sector, Not for profit, Societies and social organizations. The modules will have standard teaching material and the respective state organizations shall provide resources, free of charge, for taking up this subject in the training courses.
- 7. MSJE assuming the role of Nodal Ministry for Persons with Disabilities and have one of the officials in each ministry/ department as coordinator for inclusion of provisions and schemes for persons with disabilities.** Disability cannot be seen in isolation and to be only the responsibility



of MSJE. MSJE should transform itself as a Ministry that actively coordinates to ensure that legislations, provisions, schemes are provided in the respective ministries as per RPwD Act (present and future amended Act). MSJE will administer only special purpose schemes, pilot projects and national institutes of excellence.

8. **Inter-ministrial Coordination** : The respective ministries/ departments shall take care of the special needs of Persons with Disabilities in terms of Early Intervention, aids & appliances, inclusive & special education, skill building, employment and livelihood, Sports, Urban development, Rural development, Tourism & Leisure, Housing & Rehabilitation, Information & Telecommunication, Science & Technology, Media & Broadcasting etc. Allotment and expenditure of budget for activities directed towards empowerment of Persons with disabilities in each ministry will be followed-up at coordination cell of MSJE. This will require functional restructuring at MSJE and administrative inter-ministerial initiative from cabinet secretariat.
9. **Research & Development for Indigenised design of technology enabled Aids and Appliances** for Persons with disabilities as per the requirements of specified disabilities. This will also usher in the capability and capacity in our country to provide intelligent and smart prosthesis, as described in Point 7 below.
10. **Active/ Semi-active & Smart Prosthesis for persons with disabilities** : Now-a-days modern technology offers not only creation of lifelike limbs, but also introduces control to increase precision and comfort of movements. Such prostheses are like a lightweight prosthetic arm (less than 60% of the weight of original arm). They are stylish, sleek and made from advanced materials, with a possibility to integrate additional devices (smart phone, for instance). ALIMCO should be supported with necessary R&D and be transformed to manufacture semi active artificial limbs. The overbearing requirement of such limbs in India will bring down the price to affordable range. The aids and appliances should also undergo same technological transformation.
11. **Virtual reality (VR) classroom for practicing social adaptability** : for persons with intellectual disabilities. It is a MUST facility for enabling children who have learning disabilities/ intellectual disabilities. VR class-rooms have been single most effective tool for imparting training in Activities of daily living (ADLs), increasing general awareness and knowledge, learning concepts and widen scope of experiential learning.
12. **Exclusive Skill Training Programs with Active Links with the Market for those with Developmental, intellectual, Autism & Multiple Disabilities by 2030**. Considering the different capacity and capabilities of Persons with forementioned disabilities special assisted vocational centres and workshops will be developed for producing value added products and services. The persons with forementioned disabilities will be gainfully employed and earn livelihood & respect in the community. The government should enable marketability by providing free link with Open network for digital commerce (ONDC). All livelihood initiatives and SHGs comprising divyangjan or their families to be directly linked with ONDC free of charge with priority in government procurements. RPWD Act Section 19(2)(c)



Social Empowerment

- 1. Society will be sensitized to be free of biases and to enable effective participation and inclusion of Persons with Disabilities.** The govt will initiate suitable media campaign so that the society will respect the difference due to disability as part of human diversity and enable their inherent dignity and independence. Social barriers and out-casting and attitudinal discrimination in the communities will be overcome by sensitization and building awareness, for which NGOs may be involved. In the long term it will be achieved by exposing and explaining equality of rights and different abilities, to children by incorporating suitable chapters in their primary school education, sensitizing communities, creating awareness thru digital media and giving representation to Divyangjan in social, cultural, religious framework of the society.
- 2. Support Parents' organizations for mobilizing the community, by creating social awareness, to support persons with disabilities in exercise of their legal capacity and setting up suitable support arrangement.**
- 3. Persons with disabilities shall have representation in local government viz Municipality, Zilla Parishad, Panchayat, Cooperative societies etc.**
- 4. Utilization of National & State Funds :** The National and State funds as per Sections 86, 87 and 88 of RPWD Act will be fully operationalize in a transparent manner. The funds shall be used to create facilities for social adaptation and social empowerment of Persons with disabilities.
- 5. Social Security for Vulnerable Persons with Intellectual & Psycho-social disabilities [Intellectual disability, Autism, Mental illness, Multiple disabilities]:** They are the most vulnerable persons (deprived of their rights) in the society and need protection and care for social empowerment. The objective of the vision statement should be to enable social empowerment of such vulnerable segment in their practical life with education, training, social inclusion and dignified living facilities.
- 6. Creating awareness among financial, social, investment and registrars regarding equal rights and non-discrimination of persons with disabilities for commercial and banking transactions and property registration including banking, investment, inheritance, buying/ sale of movable or immovable property**
- 7. Develop structure at state level to track status of inheritance, movable and immovable assets of Persons with intellectual disabilities managed by the guardian**



APPENDIX B

PARIVAAR INPUTS ON MISSION VATSALYA NOTIFIED BY MINISTRY OF WOMEN AND CHILD DEVELOPMENT

Ministry of Women and Child Development have notified Draft guidelines of Mission Vatsalya for consultation. The guidelines are progressive. We appreciate this initiative very much, and wish that this initiative empowers the most deprived children in our country – children with special needs born in poor families or abandoned. There are substantial number of children with special needs as is evident from the surveys/ studies done by the government agencies, indicated as follows:

As per Operational guidelines for RBSK released by the Ministry of Health & Family Welfare, 6% of children are born with birth defects, 10% children are affected with development delays leading to disabilities.

As per INCLEN survey all over India, co-coordinated by AIIMS, N Delhi, and co-sponsored by the National Trust, an average of 12% children in the age group of 2-9 years have neuro-development disabilities.

Therefore, protection of children should also involve knowing their state of health/ disability and special needs thereof, before entrusting a child in non-institutional or institutional care. Further, these figures assume critical importance for State Adoption Resource Agency (SARA) being created by Scheme Vatsalya.

One of the stated objectives of the Mission Vatsalya scheme is to ‘cement inter-ministry convergent actions for protection of children in difficult circumstances and provide context based holistic solutions for holistic development of children from varied background’. This is, indeed, a very thoughtful objective and must consider the special circumstances of children with disabilities requiring care and protection under adverse circumstances. Because of the special requirements the Rights of Persons with Disabilities Act 2016 (RPwD Act) makes pointed mention of children’s requirements in the following sections:

- a. Taking measures to ensure children with disabilities enjoy their rights equally with others – Section 4(1)
- b. Providing Children with disabilities with appropriate support keeping in view their age and disability – Section 4 (2)
- c. Taking care of a child with disability where the parents are unable to provide care– Section 9 (2)
- d. To conduct survey of school going children in every five years for identifying children with disabilities and ascertaining their special needs. – Section 17 (a)
- e. Right to free education in neighboring school or in special school of his or her choice – Section 31 (1)
- f. Stringent punitive clauses against intimidation, humiliation, denying food/ fluids, performing medical procedures and sexual exploitation – Section 92

The above sections are reiterating their rights because the Children with disability are most vulnerable and susceptible for exploitation. Mission Vatsalya will meet this critical need of protection. Therefore, special enabling provisions need to be included in Mission Vatsalya to make it effective for Children with



disabilities. The special provisions would require close coordination at working level between operating units of Mission Vatsalya and DEPWD/ State Samaj Kalyan vibhag. There are far sighted initiatives included in Mission Vatsalya such as; Child Index, Specialized Adoption Agencies, Cradle baby centers, Foster care, National Child survey, Preventive rehabilitation, Sponsorship, etc. which can act as enablers for Children with special needs. Our recommendations to make Mission Vatsalya effective for protection of children with disabilities are:

Child Index : should also include Incidence of disabilities, Functional impediments based on WHO recognized International Classification of functions [ICF], Availability of early intervention for children with developmental delays (health), Education (Inclusive or Special), Accessibility.

Child Vulnerability Survey : Every child in the purview of Mission Vatsalya should be got examined by District Child Protection unit (DCPU). The special needs of the child should be part of his or her records. DCPU must ensure that these special needs are met in residential or non-residential care, wherever the child is placed, using services of District Early Intervention Center, CRC, DDRC or suitable civil society organization.

State Child Protection Society (SCPS) Responsibility for care of children with special needs: Catering for the special needs of Children with disabilities should be one of the functions listed in Roles & Responsibilities of SCPS. This is obligatory as per RPwD Act and must be included.

Protection & Well Being of Children with defect/ disability in Adoption Centers : It is a fact that children with disabilities generally do not get adopted and therefore their number in adoption centers grows over the time. Such children if not provided proper care and therapeutic treatment, their disability gets aggravated resulting in more and more incapacity and barriers in their future life. The State Commissioner for Persons with Disabilities should be apprised of the status of children with special needs in adoption centers after every meeting of State Adoption Resource Agency (SARA).

Include staff with rehabilitation background in District Child Protection Unit (DCPU) : The identification and meeting special needs of children in Mission Vatsalya should be included in Roles & Responsibilities of District Level Service Delivery Structure. This should be also monitored in the monthly meeting of DM. One of the two social workers in the DCPU should have educational background in disability.

Block & Village Level Child Protection Committee : The committee should be sensitized towards special needs of a child that arise as part of protection and to support the child to achieve his or her potential. One of the civil society representatives in Block committee should be from DPO or civil society engaged in disability sector. Mission Vatsalya has rightly included two Mothers in the Village Level Child Protection Committee. One of the mothers should be parent of a child with disability.



Trained Service Providers at Child Care Institutions (CCIs): As per rules of RCI Act all children with disabilities must have trained and RCI registered service providers/ rehabilitation workers. Therefore, all Children homes, Observation homes, Special adoption agencies should have trained care givers.

Establish Open Shelter for Children with Disabilities in every district/ large block : Mission Vatsalya has listed an important initiative to establish Open Shelters to look after children of working parents, in street situation, including street beggars. There is a provision for DM to establish CCIs for children with disabilities. One such CCI be established for children with disabilities in every district of the country in collaboration with District Disability Rehabilitation Centre (DDRCs) being set up by Ministry of Social Justice and Empowerment (MSJE).

Adoption Process should specially facilitate adoption of Children with disabilities : More than 50 percent of children awaiting adoption in India fall into the 'special needs' category, but it is also the category with the least number of adoptions within India. One of the reasons for this gap is a lack of understanding of special needs and the adoption process. The adoption process puts children into two categories — normal needs and special needs — where special needs are the catch-all for all children except those who have perfect health. Even children with minor health issues, correctable health issues, health conditions that can be easily managed or have no bearing on the quality of life also get categorised as special needs children. A large majority of these children require early diagnosis and intervention care which can make them healthy with much higher chances of adoption. Here DDRCs should play an active role. A quarterly visit by DDRC early intervention professional should be mandated for all Adoption Centres and Cradle Baby Reception Centres in respective districts. This collaboration of Ministry of Women & Child Development and MSJE, at DDRC - Adoption centres level, will result in the most disadvantaged children of our country to be adopted and getting a caring family. It will be a real humanitarian service.

We request you to please consider the above points for incorporation in the Draft Guidelines of Vatsalya Scheme for the benefit of children with special needs.



INPUTS ON DRAFT ACCESSIBILITY STANDARDS OF FACILITIES FOR PERSONS WITH IDD IN CIVIL AVIATION SECTOR

We have gone through the Draft Accessibility Standards which are progressive and in fair details. The standards have **defined Persons with Reduced Mobility (PRM)** whose mobility is reduced due to Physical, Sensory and **Intellectual disabilities** and need appropriate attention and adaptation to his/ her particular needs of the service.

The Standards seem appropriate for Physical impairments **but do not consider the special needs arising out of impairments in Sensory integration (Autism/ Autism Spectrum Disorder), Cognition (Intellectual disability) & Behavior (Autism, Intellectual disability)**. These deficiencies significantly limit decision making, relevant social skills, ability to communicate, relating to others and may result in stereotypical behavior, loss of perception, attention deficit, hyper-activity, attention seeking and other manifestations. They are generally accompanied by care giver (family member or a friend) to support their special needs and are co-operative, mind their own business and do not indulge in rude behavior. **Henceforth we will address them as Persons with Intellectual disabilities (PwIDs) as per Schedule 1 of Rights of Persons with Disability Act.**

Following definitions be included in the document to enable amplification of meaning when these terms are used in the support required for the special needs of PwIDs

“High Support” means an **intensive support, physical, psychological and otherwise**, which may be required for daily activities to take independent and informed decision **to access facilities** and participating in all areas of life (extract from RPWD Act Section 2(l))

“Care-giver” means any person including parents and other family members who with or without payment provides care, support or assistance to a person with disability (extract from RPWD Act Section 2(d))

The high support needs of PwIDs for physical accessibility are already covered. The High Support needs that concern aspects of psychological and otherwise needs, arising out of different sensory integration and cognitive functions are highlighted below. These are consolidated from the feedback received from Parents based on their practical experience of travelling by air with their PwID son/ daughter :

1. **Many of PwIDs need to travel with a Care-giver. The duo needs to be together all the time; during checking in process, during security check-in, during emplaning/deplaning, in many cases during visits to wash-room, during availing terminal bus services etc.**
2. **Service providers, Security staff, Cabin crew should be aware/ sensitized about high support and special needs of PwIDs, to be able to allay fears of PwID during above mentioned processes.**



3. **Some of the earmarked seats for Persons with Disabilities in waiting areas should be located in secluded, low noise and preferably with lower lighting areas. The seats should be in pair to accommodate care giver.**
4. **In waiting areas/ queues the PwIDs and their care giver should be given priority and their disability should not be misinterpreted with wheelchair sign, as these persons may not have outward signs of physical or sensory impairment.**
5. **Announcements in PA systems and approach towards PwIDs and towards their care giver should be in normal tone and not in excited or annoying tone, to avoid triggering panic and atypical behavior in PwIDs.**
6. **There have been instances where co-passengers, due to their hyper insensitivity, have asked PwIDs to be removed. The Commander & Cabin crews should be made aware about such instances (as case studies) and the Rights of Persons with Disability Act; to be able to intervene in a positive manner during such situations.**
7. **If requested by Care-giver, a special announcement be made regarding special needs or situational behavior of PwIDD passenger to avoid PwIDD subjected to undue attention or maltreatment.**
8. **During ticketing, preference to avail adjacent seating for PwIDD and care giver be given on priority and at no extra.**
9. **Where ever for any reason (such as security check, immigration check etc) if the PwIDD and his/ her care-giver need to be separated for some time, the facility in-charge (terminal operator/ security agency/ airlines/ immigration authority, custom authority etc) should be made statutorily responsible to provide escort for the PwIDD in order that he/ she is not lost or land-up in abnormal situation.**

The abovementioned special needs of PwIDs be included as an additional Section in the provisions appended under:

- a. Features to be provided by Airport operator
- b. Facilities to be provided by Airlines operating in India
- c. Facilities to be provided by Security, Customs & Immigration authorities
- d. Emergency Evacuation protocol.

The relevant instructions should be included in the MOU between govt agencies, Service contracts, Concessioner agreements, Operating instructions, and existing and future government orders.

The portal link to “Guidelines for Standards of Accessibility and Provisions of Facilities for Persons with Disabilities” be displayed prominently at the entrance/ exit points of terminals and embarkation points. This would enable both Service providers and beneficiaries to access services as per their requirements.

We request you to please incorporate the above special needs of persons with Intellectual disabilities & Autism/ ASD in the guidelines.



APPENDIX D

MONITORING ASSETS/PROPERTIES HELD BY THE APPOINTED GUARDIAN ON BEHALF OF PERSONS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES

The National Trust was created to take care of such requirements of Parents which are not catered for in any other Act or Policy. The following sections of the National Trust Act have provision to meet these special needs of PwDs:

- a. Section 14(4) Appointment of guardian and specifying his/her obligation to be fulfilled by the appointed Guardian
- b. Section 15 Responsibility for maintenance of the PwIDDs, and also care of his/ her property if specified.
- c. Section 16(1) Guardian to furnish Inventory of Assets & Immovable property within 6 months after appointment.
- d. Section 16(2) Annual report on assets and accounts of income expenditure.

The above process of Supervision and Control over the Guardian's management of property is almost non-existent in the present administration of the National Trust and LLCs.

Recently Hon. High Court of Kerala in their suo moto order has pointed out gaps in the The National Trust Act provisions for protecting the rights to property of PwDs and have directed the state government to take action. We appreciate the letter written by CEO/ Jt Secretary of the National Trust to other State Governments to implement the abovementioned sections thru district administration & LLC. However we consider it not sufficient enough. Because the district administration is too busy with other work and this work is not prioritized. The existing district LLCs do not even have an office or MIS system or manpower to undertake this activity judiciously.

We the parents strongly recommend following measures to fulfill the fundamental right to property and living, as enshrined in the Constitution, and well mandated by The National Trust Act to its Chairperson and Board for implementation:

1. Solicitor General be consulted to incorporate necessary provisions in The National Trust Act or in other Laws (Succession Acts, Contract Act etc) to ensure prior approval from LLC for sale/ gift/ mortgage/ long lease of properties under the charge of Guardian of Persons with IDD. The order of Kerala HC also mandates action to make up the deficiencies in the legal framework.
2. A MIS system be created whereby during the guardianship application stage itself the data on the movable and immovable properties and due inheritance (under Succession Acts) is collected. This information to be certified by the Guardian upon appointment.
3. Since such MIS creation at each district/ state is a far-fetched proposal, the same be created by the National Trust and reports (including exception report) be made available to LLCs for action/ monitoring.



4. An awareness Utube video in regional languages be produced for creating awareness for district administration, LLC members, Parents and Guardians.
5. Operating instructions of MIS be also produced in Video form to enable LLCs carry out their obligation under the National Trust Act using the MIS at their disposal.
6. An emergency may happen where the property of Persons with IDD need to be sold/ mortgaged to take care of the living affairs of Persons with IDD by the guardian. Such situation be also taken care by framing appropriate Rules.

We request you to kindly discuss this important special requirement of Persons with IDD and initiate necessary action.



APPENDIX E

CRITICAL SUPPORT FOR PERSONS WITH IDD TO ENGAGE IN ASSISTED WORKSHOPS/LIVELIHOOD/EMPLOYMENT.

We are listing out schemes required to address the special needs of Persons with Intellectual disabilities to enable them to live with dignity and purpose. These are:

1. Include Assisted/ sheltered workshops in DDRS scheme w/o age limit of beneficiaries

This scheme was there in DDRS earlier but discontinued after skill building came in under the aegis of NSDC. However in practice Persons with IDD have not benefitted from National Skill Development scheme due to various reasons. 1) Most of them are not qualified up to 10th or 12th standards 2) Due to norms of associated employment which does not take place in their case hence the scheme has not been taken off. 3) Lower social adaptability at work place 4) Stigma due to lack of awareness 5) Challenges of accessibility/ reaching work place without escort 6) Security

Solution:

- a. New scheme in DDRS for Assisted Workshop for Persons with ID & MI be included. This was recommended by the sub-committee which was formed to devise new schemes in DDRS

OR

- b. VIKAAS scheme of the National Trust be modified to include Assisted workshop for persons with IDD without age limit. VIKAAS scheme be given fund out of SIPDA under skill development

2. Livelihood pilot project being done successfully by PARIVAAR in five states may please be taken up for replication in Rural and Semi-urban locations.

PARIVAAR has taken up a pilot project in Odisha, Jharkhand, MP, Rajasthan and Maharashtra for providing Inclusive Livelihood for Persons with Intellectual Disabilities. One rural block each from four states and one semi-rural block in Maharashtra were chosen. During the baseline survey the existing status of persons with disabilities in the selected blocks was as follows:

Parameter	Status in %
Vocational skill	0%
Open employment	0%
Any Livelihood engagement	3%



Parivaar has followed following steps and likely to achieve 85% livelihood engagement. The training steps are:

- a. Self-advocacy training of Persons with Intellectual disabilities
- b. On-job training
- c. One time capital infusion for Persons starting own venture
- d. Forming Inclusive SHG where Person with ID along with his/ her mother is member
- e. Creating awareness of potential of Persons with ID, among the parents, workplace and community
- f. Monitoring engagement level for 2 years by mentor

After above training most Persons with ID are getting self-employment in association with their family or have become a useful member in the family micro-enterprise. We request you to take it up this scheme with Min of Rural Development/ NRLM to develop livelihood scheme for Persons with ID & MI.

3. (a) Utilization of National Fund Constituted u/s 86 of RPwD Act to Support Marketing of Goods produced in Assisted workshops.

(b) Revise Assessment Criterion for High Support Needs.

A scheme “Arunima” was run by the National Trust which supported marketing of goods produced by Persons with Intellectual disabilities in Assisted workshops. This scheme was discontinued. The funds under the National Funds may be utilized for marketing both in Exhibitions as well as using digital marketing. India is rolling out Open Network for Digital Commerce (ONDC). The National Fund should provide support for quality packaging, Supply Chain management and digital marketing for all Assisted workshops (aided or unaided by DEPWD). This will make the Assisted workshops sustainable and provide livelihood to persons with disabilities.

Many persons with intellectual disabilities are persons with High Support Needs. But they are unable to avail benefits from schemes of National Fund because the assessment parameters for “High Support Needs” are inherently defective and neither PwID nor Person with physical disability can qualify in the existing circumstances. The parameters required to be revised.

4. Updating Gharonda Scheme to avoid mis-use and enrolling more beneficiaries

Who will look after my son/ daughter with intellectual disabilities after my demise, is the most daunting question on the mind of every parent. It is assuming criticality with waning joint family system. The National trust started Gharonda scheme for this purpose but has not given sanction to new applicants for many years. The scheme also needs revision to avoid its mis-utilization. The regular monitoring with Adhaar & UDID number can avoid leakages. The scheme needs to be opened for new applicants immediately. The budget also needs to be increased.

Above are the burning issues affecting Persons with Intellectual and developmental disabilities and their families. We request you to kindly implement the above suggestions. You may also like to utilize PARIVAAR leaders for drafting the scheme, which will bring in the beneficiaries’ point of view.

Thanking you in anticipation of early action.



LACK OF AWARENESS AMONG THE MEDICAL STAFF REGARDING NEW PROCEDURE FOR ASSESSMENT OF PERSONS WITH INTELLECTUAL DISABILITIES

We have received several representations that the medical staff in hospitals are not aware about the notified procedure for assessment of following disabilities

1. Intellectual disability
2. Autism & ASD
3. Certification for High Support needs

We are giving below the extract (not whole procedure) of assessment along with reference. We request you to promulgate it to all hospitals and medical colleges who are empowered to assess and certify the disability for issue of Disability/ UDID certificate

Extract of Govt of India Gazette Notification

21. Intellectual Disability

21.1. Definition - Intellectual disability, a condition characterised by significant limitation both in intellectual functioning (reasoning, learning, problem solving) and in adaptive behaviour which covers a range of every day, social and practical skills.

IV. INTELLECTUAL DISABILITY

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21.2. Screening : Many of these children are on follow-up with pediatricians as developmental delay. Hence, they can be assessed by pediatricians and screened for associated co-morbidities, viz. hearing/ vision/ locomotor impairments/ epilepsy. Then these children are referred for detailed assessment. (See Figure 1)

21.3. Diagnosis : The screened children will be referred to Child/ clinical psychologists for Adaptive functioning and IQ testing. The tools that can be used for the same include:

- (i) Adaptive functioning: VSMS
- (ii) IQ testing: BKT/ MISIC

Based on the above the diagnosis of ID will be confirmed. Based on adaptive functioning assessment, severity scoring will be done and disability for ID charted.

21.4. Disability calculation : The disability calculation will be done based on VSMS score. The following will be used for disability calculation:

- (i) VSMS score 0-20: Profound Disability-100%
- (ii) VSMS score 21-35: Severe Disability-90%
- (iii) VSMS score 36-54: Moderate Disability-75%
- (iv) VSMS score 55-69: Mild Disability-50%
- (v) VSMS score 70-84: Borderline Disability-25%



For details of VSMS see note below

21.5. Age for certification : The minimum age for certification will be one (01) completed year. Children above one year and up to the age of 5 years shall be given a diagnosis as Global Developmental Delay (GDD). Children above the age of 5 years shall be given a diagnosis and certificate as Intellectual Disability.

21.6. Medical Authority : The Medical Superintendent or Chief Medical Officer or Civil Surgeon or any other equivalent authority as notified by the State Government shall be the head of the Medical Board. The Authority shall comprise of:

- (a) The Medical Superintendent or Chief Medical Officer or Civil Surgeon or any other equivalent authority as notified by the State Government
- (b) Pediatrician or Pediatric Neurologist (where available)/ Psychiatrist or Physician (if age >18years)
- (c) Clinical or Rehabilitation Psychologist
- (d) Psychiatrist

21.7. Validity of Certificate :

- (i) Temporary certificate for children less than 5 years: The certificate will be valid for maximum 3 years/ 5 years age (whichever is earlier).
- (ii) For children more than 5 years: The certificate will mention a renewal age. The certificate will have to be renewed at age of 5 years, 10 years and 18 years. The certificate issued at 18 years age will be valid lifelong.

22. Specific Learning Disability (SLD):

22.1. Definition.- "specific learning disabilities" means a heterogeneous group of conditions wherein there is a deficit in processing language, spoken or written, that may manifest itself as a difficulty to comprehend, speak, read, write, spell, or to do mathematical calculations and includes such conditions as perceptual disabilities, dyslexia, dysgraphia, dyscalculia, dyspraxia and developmental aphasia;

22.2. Screening.-

- (i) The teachers of the public and private school shall carry out the screening in Class III or at eight years of age, whichever is earlier. The screening test is given in Figure 2. If in the screening shows test three or more answers are in "frequently" column, then the child should be referred for further assessment.
- (ii) Every school (public and private) shall have a screening committee headed by the principal of the school. After applying the screening test, if an anomaly is detected then, the teacher should bring it to the notice of principal and screening committee of the school. The teachers shall interview the parents to assess their involvement and motivation regarding their child's education. If the parents are motivated and screening questionnaire suggests SLD, then child should be referred for further assessment.
- (iii) The child shall be referred to pediatrician for SLD assessment by the principal of the school with the recommendations of the screening committee endorsed.



22.3. Diagnosis : The diagnosis will require a team approach involving a pediatrician and clinical or rehabilitation psychologist. This would involve three steps:

- (i) Step 1- Assessment of pediatrician: The pediatrician will do the initial assessment. This will involve a detailed neurological examination including vision and hearing assessment. It has to be ensured that the child has normal visual acuity and hearing before proceeding to next step.
- (ii) Step 2: IQ Assessment: Child/ clinical psychologist will do the IQ assessment using MISIC or WISCIII. If the IQ is determined to be >85, then step 3 will be applied.
- (iii) Step 3- SLD Assessment: This would involve application of specific psychometric tests for diagnosing SLD and giving it a severity scale.

22.4. Diagnostic Tool - National Institute for Mental Health and Neurosciences (NIMHANS) battery shall be applied for diagnostic test for SLD.

22.5. Medical Authority : The Medical Superintendent or Chief Medical Officer or Civil Surgeon or any other equivalent authority as notified by the State Government shall be head the certification authority.

Short note on VSMS by Parivaar : The **Vineland Social Maturity** Scale is a psychometric assessment instrument designed to help in the assessment of social competence. It is a quality psychometric questionnaire and a good measure of adaptive behavior. The test consists of 8 sub-scales measuring:

- Communication skills
- Locomotion skills
- Self-direction
- Self-help dressing
- General self-help ability
- Occupation skills
- Self-help eating
- Socialization skills

IQ testing scales – BKT/MISIC

Assessment of Autism/ ASD: Extract of notification dated 25 April 2016

Definition: Autism Spectrum Disorder is a lifelong neurological condition typically appearing in the first three

years of life that is marked by pervasive impairments in the areas of social skills and communication; often associated with hyper-or-hypo-reactivity to sensory input; unusual interest of stereotypical rituals, or behaviours; and may or may not be accompanied by intellectual impairment.

4. For identification of Autism cases the INCLIN tools shall be used. INCLIN Tools for identification of autism cases is at **Annexure A**.
5. The Indian Scale of Assessment of Autism has been developed which provides the detailed assessment procedure and tools for assessing the extent of disability for persons with autism beyond 6 years of age. The Indian scale for assessment of autism is at **Annexure B**. Certification of disability for persons with autism may be carried out by a Autism Certification Medical Board, duly constituted by the Central Government or the State Government, comprising of members from the following fields:



1. Clinical Psychologist/Rehabilitation Psychologist
2. A Psychiatrist
3. A Paediatrician or General Physician as the case may be

The State Governments are, therefore, requested to constitute the Autism Certification Medical Board immediately.

6. Based on the identification of cases of Autism in terms of INCLIN tools, certification of Autism on the basis of ISAA tools shall be issued. The Proforma for issuance of Certificate of Disability of Persons with Autism shall be as per **Annexure C**. The certificate would be valid for a period of 5 years for those whose disability is temporary and are below the age 18 years. For those who acquire permanent disability, the validity can be shown as “Permanent” in the certificate..

Assessment of High Support Needs : Govt. Notification dated 11 March 2019

“CHAPTER VA

14A. (1) The State Governments or Union Territory Administrations shall notify the authority to whom a person with bench mark disability can apply for the high support requirement as per sub-section (1) of Section 38 of the Act.

(2) Only the persons with benchmark disabilities having permanent certificate of disability shall be eligible for applying for high support requirement.

(3) The State Governments shall constitute Assessment Board at the District level or Division level based on the number of persons with benchmark disabilities comprising the following:-

(a) District Chief Medical Officer or Civil Surgeon or Medical Superintendent.....Chairperson;

4 THE GAZETTE OF INDIA : EXTRAORDINARY [PART II—SEC. 3(i)]

(b) District Social Welfare Officer.....Member;

(c) Five rehabilitation specialists [Physical Medicine and Rehabilitation or Orthopaedic specialist, ENT specialist, Ophthalmologist, General Physician (if the applicant is 18 years or above) or Pediatrician (if the applicant is less than 18 years), Psychiatrist].....Members;

(d) Occupational therapist or speech therapist or Clinical Psychologist or Physiotherapist (as per requirement).....Member;

(e) Any other expert as the Chairperson deems appropriate.....Member.

(4) The authority notified under sub-rule (1) shall refer every case to the Assessment Board for assessment of applicant’s high support requirement.

(5) The Assessment Board shall invite the applicant of high support requirements for assessment and may, if necessary, seek clinical assessment.

(6) The Assessment Board shall assess the applicant on the basis of the six parameters (a) to (f) and assign scores on the basis of the 100 point graded weightage indicated



PARIVAAR

NATIONAL CONFEDERATION OF PARENTS' ORGANIZATIONS

(For Persons with Mental Retardation, Autism, Cerebral Palsy & Multiple Disabilities)

Registered under the Societies Act 1860 Regn. No..S-30635 of 1996

C 4/5, S.D.A.I Floor, Opp. IIT Main Gate, NEW DELHI 110 016, Tel: 26964379

Reply to: **PARIVAAR, A-1, Green Acres CHS, Salunke Vihar Road, Pune - 411048. Email: parivaarncpo@gmail.com**

APPLICATION FOR MEMBERSHIP

(Put tick mark wherever required)

Membership No. _____

Copy of NGO Registration certificate and Constitution must be submitted with this form

1.	Name of the Applicant Organization					
2.	Complete Address (with Pin Code)					
3.	Telephone Nos. (with STD code)					
	Mob No.		Email:			
4.	Parent Association		Professionals' Association		Voluntary Organisation	
	Registered under Society's Regn. Act		Regn. No.		Date:	
	Registered under Public Trust Act (Enclosed Copies of Regn. Certificates & a copy of constitution)		Regn. No.		Date:	
5.	Disability working for: PwIDDs	Intellectual disability	Cerebral Palsy	Autism	Multiple Disabilities	
6.	No. of Members : PARENTS & SIBILINGS:		NON-PARENTS:		PwIDDs	
7.	Name & Complete Residential Address (with Pin Code) of					
	President			Secretary		
	Mob.No.			Office:		
	Mob.No.			Office:		
	Email:			Email:		
8.	Category of Membership & Membership Fees (April to March)					
i)	PATRON	One time lumpsum Corpus Donation of NOT LESS THAN Rs. One Lakh				
ii)	MEMBER	One time Corpus Donation : Rs. 1000/- Corpus donation Rs 1000 + Annual FeeRs 1500 = Total Rs 2500				
iii)	AFFILIATE MEMBER	One time Corpus Donation : Rs. 1000/- Corpus donation Rs 1000 + Annual Fee Rs 1500 = Total Rs 2500				
9.	DECLARATION: We have read the Constitution of PARIVAAR and agree to abide by the same. Our membership shall be subject to approval by the Executive Council of PARIVAAR. If admitted, we shall work for fulfillment of the aims and objectives of PARIVAAR.					
10.	Enclosed One time Corpus Donation and Membership Fees of Rs. _____ in Cheque / DD No. _____ in favour of PARIVAAR NFPA payable at Pune) _____ dated _____ on (Bank)					

Date: _____ Rubber stamp of the Association
Signature of President/Secretary _____

PLEASE ATTACH FOLLOWING DOCUMENTS WITH APPLICATION

- Society/ Trust registration certificate
- Registration certificate with state govt. dept for PwD
- Copy of Society constitution or trust deed
- List of members, tel no and indicating Parent or Non parent against each name

FOR OFFICE USE:

Application Recd. on _____ Receipt No. _____ Date _____

Treasurer's Signature _____ Date _____ Gen. Secretary's Signature _____

Membership : APPROVED / NOT APPROVED BY E.C. on at the E.C. Meeting held at _____



ORGANIZATIONS REGISTERED WITH PARIVAAR NCPO

List of Activities : DC-Day care center, EIS- Early Intervention Services,
GH-Group home or Hostel, PA-Parent awareness/ Advocacy, SA-Self Advocacy,
SCH-School, WS-Work shop/ Vocational training, EMP- Employment training

Sr. No.	Reg. No.	Name of Organization	City	Tel. No.	Activity (see List)
		CENTRAL ZONE			
		MADHYA PRADESH			
1	MP101	Indore Society for Mentally Challenged	Indore	9827205554	SCH,WS
2	MP102	Parents Society of MP for Welfare of Persons with Disabilities	Bhopal	9826938422	SCH,WS,SA,PA
3	MP103	Madhya Pradesh Viklang Sahayta Samiti	Ujjain	9406660063	PA,SA,SCH, WS,EIS,GH,DC
4	MP104	Saraswati Sanskar Bal Kalyan Samiti	Indore	9.19755E+11	SCH
5	MP105	Nishakt Vayakti Abhibhavak Sangh Jabalpur	Jabalpur	9425150672	PA,SA,WS
6	MP106	Nagda Zenth Social Welfare Society	Nagda	9425195626	DC,WS,PA
7	MP107	Adhar Foundation	Chindwara	8989173581	SCH
8	MP108	Nishaktjan Adhar Welfare Society	Indore	9644441494 / 9977157013	WS
9	MP109	Divyangjan Abhibhabhak Sangh Kalyan Samiti (Life Line Service Society)	Sagar	8319567532	DC,EIS,GH,PA, SA,SCH,WS,EMP
10	MP110	Devbrat Gram Vikas Siksha Samiti	Bhopal	8770252437	SCH,GH,SA,DC
11	MP111	Sneh Parents Association	Nagda	9425195626/ 9981479661	PA
12	MP112	The Serrendip	Jabalpur	9844517598/ 8826654911	PA
13	MP113	Lakhdatar Foundation	Ratalam/MP	9981479661/ 8871531986	PA
14	MP114	Shri Vatsalya Nishakt jan Kalyan Samiti	Bhopal	8109410161/ 7583031153	
		RAJASTHAN			
15	RJ101	Parents Association of M H; Dr. K C Bafna,	Jodhpur	9829888585	PA
16	RJ102	Asha Ka Jharna	Nawlgarh	9414036896	SCH
17	RJ103	Support and Advocacy for Helpless People Sansthan	Jaipur	8209296292	PA
18	RJ104	Panchsheel Parents Association	Udaipur	9680245554	SCH,WS,SA,PA
19	RJ105	Prachya Shodh Peeth Samiti / Prayass Sansthan	Udaipur	9351549074	SCH,WS,SA,PA
20	RJ106	Approach Autism Society	Jaipur	9214309551	EIS,WS,PA
21	RJ107	Yogesh Shekshik Punarvash Awam Shodh Sansthan	Niwai, Tonk	9829316028	EIS,GH,PA,SA,SCH,WS
22	RJ108	Institute for Rural Development Technical Research (Shramsheela Ashram)	Baran	9799925275	SCH,WS,PA
23	RJ109	Sehyog Society	Jaipur	7568018500	SCH
24	RJ110	Society For Welfare Of Mentally Handicapped (Shree Nirmal Vivek School)	Jaipur	9649014230	SCH,WS,GH
25	RJ111	Mercy Rehabilitation Society Swaimadhopur Rajasthan (Muskan Residential Special School)	Swai Madhopur	9828810154	SCH
26	RJ112	Marudhara Bal Shikshan Sansthan	Pipar city, Jodhpur	9460956847	SCH



27	RJ113	Rajasthan Mahila Kalyan Mandal Sanstha (Vishwamitra Ashram)	Chachiyawas, Ajmer	9413223809	EIS,SCH,DC,WS
28	RJ114	Deep Vidhya Mandir Samiti	Dausa	9414035821	SCH,WS,SA,PA
29	RJ115	Divyang Parivaar Sewa Samiti	Swai Madhopur	9460993191	
30	RJ116	Jyotirgamay Seva Sansthan	Pushkar, Ajmer	8875647459/ 9602058320	PA
31	RJ117	Sanskar shaikshik Punavas Evam Anusandhan Sansthan	Sirohi, Rajasthan	8306070472/ 9904538217	PA
32	RJ118	Swami Vivekanand Punarwas Sansthan	Sikar	9672472229	PA
		CHHATTISGARH			
33	CH101	Samartha Parents Association for Persons with Mentally Retarded	Korba	9425539703	SCH,PA
34	CH102	Sneh Sampada Vidyalaya for (MC Children)	Durg	9425553996	DC,GH,WS
35	CH103	Sarthak Kadam Sansthan	Bhilai	9752099022	SCH,SA,WS
36	CH104	Mansik Awam Vikalang Kalyan Abhibhawak Sangh	Dhamtari	9827186959	EIS,WS
		EAST ZONE			
		WEST BENGAL			
37	WB101	Association of Parents of Persons with Autism Spectrum Disorder(West Bengal)	Kolkata	8777253542 / 9434086363/ 9433246128	PA,SCH,WS
38	WB102	Behala Bodhayan	Kolkata	9339751472 / 033-24939410	DC,GH,PA,SA, Respite Care WS
39	WB103	Bodhayan-An Assn. of the Parents of Persons with Mental Retardation	Kolkata	033 -2423 6741 / 9163877871	PA PLAY CLINIC RESPITE CARE & WS
40	WB104	Navodit (Parents Assn. Of Asansol Anandam)	Asansol	0341- 2307580 / 91 9434215099	PA
41	WB105	Parents of Hope Durgapur	Durgapur	8016314617/ 8918971807/ 9475543404	PA
42	WB106	Partner - Hooghly	Hooghly	033-26319260 / 89103 59426 - 9433151396	WS,SA,PA,DC,GH
43	WB107	Prayas Community Living Center Tollygunge	Kolkata	8902184912 / 7890580375	GH,PA,WS
44	WB108	South Kolkata Parasmoni	Kolkata	9830411480	WS,PA
45	WB109	Uttarpara Ashraya	Bhadrakali,Uttarpara	9831182790	WS,DC,PA
46	WB110	The Association for the Development of the Mentally Handicapped (MENTAID)	Kolkata	033 827401 1231 / 9831004412	SCH,WS,SA,PA
47	WB111	Speech And Hearing Action Society (SAHAS)	Durgapur	9434009877/ 0343-2531188	PA
48	WB112	Kalyani Life Institute	Kalyani	3325828824 / 9830017416	DC,EIS,PA,SA,SCH,WS
49	WB113	Childlife Preserve Shishur Sevay		033-24981120, 9830240182	SCH,GH



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50	WB114	Bhabna Trust	Kolkata	9231812292 9836640	551EIS,PA,SA,WS,EMP
51	WB115	Chinsurah Sense Society	Chinsurah	9830832150	EIS,SCH
52	WB116	Joygram Social Welfare Society	North 24 Parganas	9635606677/ 7980720053	Sch,PA,CBR
53	WB117	Nir Ideal Home	Dist-24 Parganas (north)	9734403702/ 98300881966	
		ODISHA			
54	OD101	Orissa. Assn. of Parents with Special Children	Cuttack		SA,PA,DC
55	OD102	Shraddha	Rourkla	9438187899	SCH,WS,SA,PA
56	OD103	Parents Assn. MR Children	Bhubaneshwar	9437141058	SA,PA
57	OD104	Hope	Rajgangpur	06624-220131 / 9437083471	SCH,WS
58	OD105	Dr. Braja Vihari Mohanty Memorial MR Benefit Trust	Bhubaneshwar	0674-2577921 / 09437075921	GH
59	OD106	Center for Autism Therapy Counselling and Help	Bhubaneshwar	9937004040	SCH
60	OD107	District Association of Parents and Person with Disability [DAPPWD]	Sonepur	6654 220199 / 9437194908	SCH,WS,SA,PA
61	OD108	Parents Assn. for the Welfare of the Mentally Retarded	Rourkla	91- 6742320960	SCH,SA,PA
62	OD109	Shyam Anu Debaki Memorial Trust (An Organization for Old and the Differently Abled)	Rourkla	09437196994 / 9438168361	SCH
		JHARKHAND			
63	JH101	Parents Association of Mentally Handicapped of Jamshedpur (PAMHJ)	Jamshedpur, east Singbhum	0657-2231342 / 09234672214	WS
64	JH102	Bhawishya Kiran Parents Association	Ramgarh, Ranchi	9431535390 / 6203274062	DC,SA,SCH,WS
65	JH103	Deepshikha	Ranchi	0651-6570685	DC,SCH
66	JH104	Jharkhand Parents Assn	Ranchi	8940709028	WS,PA,SA
67	JH105	Pehala kadam (Narayani Charitable Trust)	Dhanbad	7004912363	SCH,WS,SA,PA
68	JH106	People For The Advancement of The Handicapped (PATH)	Jamshedpur	0657-2237766	SCH,WS,SA
69	JH107	Divyang Margdarshan Trust	Jamshedpur	9308820767 / 7004719087	PA
		BIHAR			
70	BH101	Raj Sewa Sansthan	Nawada	9709799359	EMP
71	BH102	Akshaywat Sewa Sansthan	Nawada	9470494020	EMP
72	BH103	Nav Chetana Vikas Kendra	Nawada	9110093788, 9955560024	EMP
73	BH104	Vikalp Foundation	Gaya	9430841602	EMP,SA,DC
74	BH105	Pataliputra Parents Assn. of Mentally Handicapped	Patana	9431015499	SCH,WS,SA,PA
75	BH106	Vihar Viklang Adhikar Munch	Aurangabad	9431251459 / 7762039291	PA
76	BH107	Utkarsh Seva Sanstha	Bihar	8294370626	NPA
77	BH108	Ujala Foundation	Bihar	6204593208	DPO
78	BH109	Daudnagar Divyang Manch	Bihar	9110962835	DPO
79	BH110	Divyang Chetana Manch Trust	Bihar	7549377759	DPO



80	BH111	Savera Divyang Foundation	Bihar	6200050696	DPO
81	BH112	Divyang Adhikar & adhikarita Manch	Bihar	9199013113	DPO
82	BH113	Jagruti Foundation	Bihar	9304523266	DPO
83	BH114	Divyang Kalyan Samiti	Bihar	9934878212	DPO
84	BH115	Unmukt Foundation	Bihar	6204072331	DPO
85	BH116	Sabala Foundation	Bihar	9873422785	DPO
86	BH117	Gramoday Seva Sanstha	Bihar	8340357010	DPO
87	BH118	Samrpan Foundation	Bihar	9798263741	DPO
88	BH119	Baudhik Vikas Sansthan	Bihar	9431251455	DPO
		NORTH EAST ZONE			
		MANIPUR			
89	MN101	Parents Association for the Differently Abled	Imphal	9436039450/	GH
90	MN102	All Manipur for Mentally Handicapped			
		Persons Welfare Organisation	Imphal	9856376817	SCH,WS,SA
		MIZORAM			
91	MZ101	Spastic Society Of Mizoram	Aziwal	9436155462	GH
92	MZ102	Shelam Spastic Society SERCHHIP District	Serchhip		PA,SA
		ASSAM			
93		(PASS) An Organization of Parents for Welfare of	Guwahati	9101337098	
		Persons with Intellectual & Developmental Disabilities		9435144104	GH
94	AS102	Pragati Parents Association	JORHAT	9435247311	SCH
95	AS103	North Eastern Regional Multipurpose School	Dist. Vishwanath	9085969054/	
		and Handicapped Training Center		7002030938	SCH,GH
96	AS104	Prayash Parents Association of Disable	Silikhaguri	9854753484	
97	AS105	Mrinaljyoti Rehabilitation centre	Duliajan	09954487893 /	
				09954485193	WS,SCH,PA
		SIKKIM			
98	SK101	Spastics Society of Sikkim (Associate Member)	Gangtok	03592-203321 /	
				9847858218	SCH
		NAGALAND			
99	NA101	Nagaland Parents Association for the Disabled	Kohima	9856683130	GH
100	NA102	Dimapur District Disabled Parents' Association	Dimpur	8794529526/	
				9612163625	SCH,WS,SA,PA
		TRIPURA			
101	TR101	Abhoy Mission	Aagartala	9436123069	
				(0381) 2338607	SCH,WS,PA
		MEGHALAYA			
102	ME101	Meghalaya Parents' Association of the Disabled (MEPAD)	Shilong	9436101329	SA,PA
103	ME102	Parents Association For Disabled	Nongstoin	9615398454	
				8787687206	SCH,PA,WS
		ARUNACHAL PRADESH			
104	AP101	Arunachal Pradesh Parents Association			
		For Disabled (APPAD)	Naharlagun	9436861193	PA



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NORTH ZONE					
DELHI					
105	DL101	Muskaan Parents Assn. for the Empowerment of Persons with Intellectual Disability (MUSKAAN PAEPID)	Delhi	011-41761873	WS,EMP,SA,PA
106	DL102	Udaan Foundation for Spastics & Mentally Handicapped Persons	New Delhi	9911901948	SCH,PA,PA
107	DL103	Action for Autism	New Delhi	011-40540991	SA,PA,SCH
108	DL104	Aradhana Parents Support Group	New Delhi	01122157564/ 9818854614	WS
109	DL105	Aaroh	New Delhi	9126899044/ 011-26144721	SCH,PA
110	DL106	Athak Prayas Sanstha	Delhi	9560390901	PA
111	DL107	Autism Society for Awareness & Rehabilitation	New Delhi	9810020930 9810140852	PA
112	DL108	Awareness for inclusion Foundation	New Delhi	999163926/ 7762039291	PA
Uttar Pradesh					
113	UP101	Uttar Pradesh Parents Assn. for The Welfare of Mentally Handicapped citizens	Lucknow	9838655461/ 0522-2352635	SCH,WS,PA,SA
114	UP102	Bundelkhand Mansik Viklang Kalyan Abhivavak Samiti	Jhansi	0866-2547074 / 9849524249	PA,SA
115	UP103	Prayaas Association of Parents for Special Children	Varanasi	9415969909	PA
116	UP104	Sampata Parents' And Guardian's Association of Mentally Challenged Persons	Railbareli	9415190420	PA
117	UP105	Creative Education and Development Society [CEADS]	Etah	9412618076	SCH,DC
118	UP106	Yaduvanshi Janta Shikshan Samsthan	Gazipur	9918454611	SCH
119	UP107	Wonder Child Parents Association (Sankalp Day Care)	Kanpur	9956079347	SCH
120	UP108	Rajeshwari Seva Sansthan	Auraiya	9452577101	PA
121	UP109	Institute Of Rehabilitation	Gaziabad		
UTTARAKHAND					
122	UK101	Inspiration	Dehara dun	9837721548	SCH
123	UK102	Latika Roy Memorial Foundation	Dehara dun	0135-2761014 / 2761411	SCH
124	UK103	Rosni Society	Haldwani (nainiatal)	7500841111 9837018726	SCH
PUNJAB					
125	PB101	Sapna Parents Assn. for M.R.	Hoshiarpur	9417224999	PA
126	PB102	Chaanan Assn. for MR	Jalandhar	09417006059 01814631899	WS,PA,SA
127	PB103	Ashirwad (The North India Cerebral Palsy Assn)	Ludhiana	0161-2564551	PA
128	PB104	Swami Piara Singh Maharaj International Humanity Welfare Society	Zirakpur	98720 86417	SCH
129	PB105	Amrit Parivaar Parents Association	Amritsar	8146520764/ 9814420764	SCH,GH,SA
130	PB106	Fathegarh Sahib Special Children Parents Association	Fathegarh	9814850163/ 09815950301	SCH



131	PB107	Swabhiman Society	Moga	9646209000/ 9238106667	PA
132	PB108	Asha Deep Welfare Society	Hoshiarpur	01882-272461	SCH
133	PB109	Global Institute for Childhood Disability	Amritsar	9417294911	SCH
134	PB110	Agosh Holding Hands Society	Amritsar	9814933657	SCH
135	PB111	Punrajot Charitable Trust	Barnala	91-1679-242445	SCH,WS
136	PB112	Swayam Society of Parents Association Of Person with Disabilities	Mohali	9814213860	PA
137	PB113	Scientific Awareness And Social Welfare	Sangrpur		GH,SCH
138	PB114	Anmol Parents Association	Amritsar	9216913015	PA,SA
139	PB115	Ek Prayas Parents Association for MR Children	Fazilka	9501254400	PA,SA
140	PB116	Samarpan society for the development of mentally disabled	Taran Taran	9815258580	SCH,WS,SA,PA
141	PB117	Red Cross Parents Assn. for Welfare Of Mental Handicapped Children	Amritsar	9888517238	SCH
		HIMACHAL PRADESH			
142	HP101	Udaan Parents / Guardian Society for the MR Children of Shimla	New Shimla	9911901948	SCH
143	HP102	Adhikar Parents Association	Una Dist	9418145425/ 7718079425	PA
		CHANDIGARH			
144	CN101	Sadhna Society for MH	Chandigarh	9440625012	SCH
145	CN102	The Parents / Guardians Society of Children of GIMRC	Chandigarh	7696050973	SCH
146	CN103	AshaDeep Welfare Society for PWIDD	Chandigarh		SCH,WS,SA,PA
		JAMMU AND KASHMIR			
147	JK101	Humanity Welfare Organisation (HELPLINE)	Anantnag, Kashmir	0946064964 01932233141	PA,SA
148	JK102	AASRA	Kailsh	9469132913	SCH
149	JK103	Disabled Care Foundation	Gandhi Nagar	9419122810	PA,SCH
150	JK104	Parivaar Baramulla Association of Parents	Baramulla	9469470014	SCH,PA
		SOUTH ZONE			
		KARNATAKA			
151	KR101	KPAMRC	Bangalore	080-22441289	PA,WS
152	KR102	Swasahaya Samuchhaya Parents Assn. of Mentally Retarded And Cerebral Palsied Children	Mysore	9342836045	SCH,WS
153	KR103	Sneha Bhavan Institute	Bangalore	9446227169	WS
154	KR104	Asha Charitbale Trust	Bangalore	080- 23225279 / 23230357	SCH
155	KR105	Assoication for Mentally Challenged	Bangalore	9845325100	SCH,WS
156	KR106	Shristi Special Academy	Bengaluru South	9449002948 / 9972804021	SCH
157	KR107	Anga Vikalara Poshakara Sangha	Davangere	08193-260341/ 9880649887	SCH
158	KR108	Parents Assn. of M. H. Children	Bangalore	080-26566197/ 09449302718	WS
159	KR109	WARDS	Bangalore	080-25260285	SCH



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160	KR110	Parents Assn. of Persons with CP And Associated Disorders (PAPCP)	Bangalore	8025201616/	SCH
161	KR111	Belgaum Association of Parents	Belgaum	9448352894/ 0831-2404628	SCH
162	KR112	Udupi Parents' Association for Mentally Challenged Citizens	Manipal	9845540293	GH,WS
163	KR113	Aruna Chetana Parents' Association	Bangalore	9741598443/ 8151877406/ 9448312624	SCH
164	KR114	Anupama Parents' Association for Mental Retardation "Premakamal"	Gulbarga		PA
165	KR115	Society for the Autistics in India / Apoorva Centre for Autism	Bangalore	8762780445 / 9845076140/ 9448372002	DC
166	KR116	Spastics Society Of Karnataka	Bangalore	40745900	SCH
167	KR117	Glory Foundation	Bangalore	99004972040/ 9342949755	GH,WS
168	KR118	Autism Society of India	Bangalore	080-41511345/ 9845953473	PA
169	KR119	Dharithree Trust	Bangalore	Tel 23567518/ 9448353888	SCH,GH
170	KR120	Assisted Living for Autistic Adults [ALFAA]	Bangalore	25327762 / 9741418103	DC,GH
171	KR121	Downs Syndrome Association Of Karnataka	Bangalore	65648745 / 98455 40303	SCH
172	KR122	Mysore District Parents Association for Empowering Developmentally Disabled	Mysore	9448054272	WS
173	KR123	Asha Kiran Residential School for the Mentally Challenged	Shimoga	08182-240181/ 9448288487	SCH
174	KR124	Fame India	Bangalore	080 - 22446622	SCH,WS
175	KR125	Tamanna School for Specially-Abled Children OPJindal Centre JSW Foundation	Bellary	7829906730	SCH
176	KR126	Seva-in-Action	Bangalore	25520347	SCH,WS
177	KR127	Parents Assn. for Differently Abled Adults [PADA]	Bangalore	9845369872	WS
178	KR128	Mathru Mandali Shishu Vikasa Kendra	Mysore	9964685131	DC
ANDHRA PRADESH AND TELANGANA					
179	AP101	Parents Assn. for M H Persons	Godavarikhani	9491141530	SCH,WS,GH
180	AP102	Parents Association for the Mentally Handicapped Persons (PAMENCAP)	Karimnagar	91-986693300	SCH,WS
181	AP103	Lekhadeep Parent Assn.	Hyderabad	3710024/39106636	WS
182	AP104	Parents' Association for the Welfare Of the Mentally Handicapped Persons. (PAWMENCAP)	Hyderabad	23536902/23590904/ 9703331622	SCH,GH
183	AP105	Uma Manovikasa Kendram	Kakinda	0884-2306039, 09848164779	SCH,WS
184	AP105	Dakshinya Parents Association For the Mentally Handicapped	Guntur	918632359181	EIS



185	AP107	Prerana Special School	Hyderabad	9849629707/ 9849723994	EIS,SCH,WS
186	AP108	Ashyam Parent's Association	Telangana	040 27142025/ 9959244558	WS
187	AP109	Maanasika Viklangula Samkshema Sangam (Parent Organization for the Welfare of the intellectual disabled children)	Vishakhapattanam	0891-2742114 / 9866102114	WS,SA,PA
188	AP110	Swayamkrushi	Secunderabad	040-27990741 / 27992420	SCH,WS
189	AP111	Indian Red Cross Society	Nellore	0861-2343483	SCH
190	AP112	Manochetana	Warngal	08702550419 09392488514	SCH,WS
191	AP113	Ashadeep, Parents Association For Mentally handicapped	Visakhapatnam	09393100057	WS,PA
192	AP115	People's Action For Social Service	Tirupati	8772240262	WS
193	AP116	Parents Association for Autistic Children	Secunderabad	9247165760 9440249399	SCH
194	AP118	Sirisha Rehabilitation Centre	Kirshna	9441413161, 08676-234342	GH
195	AP117	Sadhna Society for MH	Hyderabad	9440625012	
		KERALA			
199	KL101	Kasargod District-Parivaar	Kasargod	9446606176	WS
200	KL102	Mithram	Arakkunnam	9388467483	GH,SCH,WS
201	KL103	Parivaar Kerala	Thammanam	9446790616/	PA
202	KL104	Association of Parents of the Retarded	Trivendram	0472-3200967	PA
203	KL105	Parivaar Pathanamthitta	Pathanamthitta	9447104696 9633470888	SCH,WS
204	KL106	Kollan Dist-Parivaar	Thodiyaour	9388403314	PA,SA
205	KL107	Eranakulam District-Parivaar	Thammanam	9847765426	PA,SA
206	KL108	Wayanad-Parivaar	Wayanad	9446306146	PA,SA
207	KL109	Kottayam-District Parivaar	Kottayam	9446379352	PA,SA
208	KL110	Reena Memorial Samrakshane	Cochin	9895702491	PA,SA
209	KL111	Alappuzha-District Parivaar	Alappuzha	9846110086/ 9388467483	PA,SA
210	KL112	Kannur-District Parivaar	Kannur	9446306146/ 9446857547	PA,SA
211	KL113	Kozhikode - Parivaar	Kozhikode	9656292468	PA,SA
212	KL114	Trivandrum-Parivaar	Trivandrum	9562010200	PA,SA
213	KL115	Idukki-Parivaar	Chithirapuram, idukki	9447820282	PA,SA
214	KL116	Thrissur-Parivaar	Thrissur	9747765426	PA,SA
215	KL117	Palakkad-District Parivaar	Kallekulangara	9447290622	PA,SA
216	KL118	Malappuram District Parivaar	Tirur, Malappuram	9495231155	PA,SA
217	KL119	Lovely Hearts Foundation	Pathanamthitta	04735252709 9745524362	SCH



**ANNUAL REPORT
2021 - 2022**

TAMIL NADU					
218	TN101	Phoneix parents Assn.	Madurai	9842964009	WS
219	TN102	Madurai Phoenix Parent Association	Madurai	9842964009	
				9025700400	WS
220	TN103	SAARTHY-PAMMAC	Coimbatore	9443725925	
				9994980202	WS
221	TN104	MAITHREE	Chennai	044-2483 2026	SCH,WS
222	TN105	Murthuzaviya Special School for the Disabled	Chennai	044 - 28546579/	
				28592690	SCH
223	TN106	Dhaya Parents Assn. for the Welfare MR and Differently Abled Persons	Cuddalore	9443317322	SCH
224	TN107	Parents Help Parent's Assn. of Aikya	Chennai	9444960643	PA
225	TN108	Olirum Mottukal C/o Vidhya Prakaasham School for Special Children	Thoothukudi		SCH
226	TN109	Parents Association of M.H. (PAMHS)	Pondicherry	9442527703/	
				9486747445	PA
227	TN110	SPAT (Sirakugal) - Special Children's Parents Association	Tiruchirappalli	9944548739	WS
228	TN111	Parents Welfare Trust For Mentally Retarded Children	Nagercoil	9443129405	WS
229	TN112	Kanyakumari Rural Dvelopment Society (KARD)	Nagercoil	04652-279148 /	
				91 9443129405.	WS
230	TN113	Parents Association for Upliftment of Mentally Challenged Citizens	Salem	0427-2383230 /	
				09894337883	PA
231	TN114	North Chennai Mentally Retardation Parents' Association	Chennai	9710467379 /	
				9444621574	PA
232	TN115	Karur District PAMMAC	Karur	9944298766	SCH
233	TN116	Downs Syndrome Association of Tamilnadu	Chennai	044-24340256/	
				9003058060	PA
234	TN 117	Parents association Of person with Disabilities of Autism,MR,CP,&MD (PAAMRC)	Krishnagiri		PA
235	TN 118	Erode District Parents Association (PAMMAC)	Erode		PA
236	TN 119	OASIS SPECIAL SCHOOL	Chettikulam/		
			Nagercoil	9486559616	PA
237	TN 120	(KARD) OASIS, kanyakunari District parents Welfare Trust for Mentally Retarded Children	Nagercoil	91 44 24719947/	
				48/49	PA
WEST ZONE					
MAHARASHTRA					
238	MH101	The Parents of the Mentally Handicapped	Mumbai	022-26134124	
				9819964789	PA
239	MH102	SAVALI – Assn. for MR & CP Children	Pune	020- 2528 2379	GH,WS
240	MH103	SWEEKAR – Assn. of Parents of MR	Nagpur	0712-2225766/	
				9823666388,	SA,WS
241	MH104	AWMH Maharashtra	Mumbai	9833118613	EIS,SP,SA
242	MH105	Association Of Parents Of Mentally Retarded Children (ADHAR)	Thane	9821054369	GH
243	MH106	Jagruti Parivaar	Wai, Satara	9423340706	SCH,WS



244	MH107	Sanmati Matimand Vikas Kendra	Ichalkaranji	0230-2432724	SCH
245	MH108	Sankalp Assn. of Parents With Persons with MR	Nagpur	9765169262	SCH,WS
246	MH109	Om Creation Trust	Mumbai	9833217509	WS
247	MH110	Society for the Voc. Rehab. Of the Retarded	Mumbai	9323878691	WS
248	MH111	Umed Pariwar	Pune	7350128993	GH,PA
249	MH112	Asha Deep, MR Children Parent Assn.	Ratnagiri	9422631417	SA
250	MH113	Prabodhini Palak Sanch	Nasik	9422283251	SCH,WS,GH
251	MH114	Parents of Down's Syndrome Association	Mumbai	9920447481 932340	1635GH,SA
252	MH115	Jagruiti Palak Sanstha	Thane	9870201685 932295	1546SCH,WS,DC
253	MH116	Swayamsidha Matrupalak Sanstha for MR & CP	Aurangabad	9822266812	SCH,WS
254	MH117	Swami Brahmanand Parent Assn.	Mumbai	9833144341	SCH,WS
255	MH118	Ameya Palak Sanghatana	Thane	9323998600	WS
256	MH119	Shraddha Charitable Trust / Workshop For the Autistic and Mentally Challenged	Mumbai	9820904079	WS
257	MH120	Snehalaya Charitable Trust	Thane	9820484581 9869547241	WS,GH
258	MH121	Aawhan Palak Sangh	Mumbai	9819007617	WS
259	MH122	Anand Parivaar Charitabale Trust	Satara	9422038029	WS,GH
260	MH123	Nav Jeewan Palak Sangh	Aurangabad	9975596152	SCH,WS
261	MH124	Dilkush Welfare Society	Mumbai	9820271003 9929447481	WS,SA
262	MH125	Janeev Jagruiti Bahudeshiys Sansta	Solapur	9960875132	WS,EIS
263	MH126	Samvedana Manasik Apang Palak Sangh	Sangali	9860031185	EIS,WS,GH
264	MH127	Nirdhar Pratishthan	Mumbai	9324336388/ 9226304640	GH,WS
265	MH128	Jivala Palak Sanstha	Latur	9422071570	WS
266	MH129	'Samvedana' RSS Jan Kalyan Samiti	Latur	9422072517/ 9823036025	EIS,WS,GH
267	MH130	Chetana Apangmati Vikas Sanstha	Kolhapur	9975131889	SCH,WS
268	MH131	Navkshiti	Mulshi	9552547456	WS,GH
269	MH132	Kshiti	Mumbai	65289958	WS
270	MH133	Sopan	Mumbai	9323202768 9136013172	WS
271	MH134	Aakar Parents Association	Mumbai	09619668907 9867266148	WS
272	MH135	PAPA Parents Association	Yavatmal	9850751395 9850424657	SCH,WS
273	MH136	Parivartan Shikshan Sanstha	Mumbai	9423112939	SCH,WS
274	MH137	Suhit Jeevan Trust	Raigad	02143-253085	WS,GH
275	MH138	Vadakumkara Thomas Chacko Memorial Trust C/o Vadaketh Development Center	Raigad	(0233) 2231 73	WS
276	MH139	Swami Brahmanand Pratishthan Centre For Special Children	Mumbai	9833144341,	SCH
277	MH140	Maharashtra Apang Shikshan Sanstha	New Mumbai	02452-246387	GH
278	MH141	Titlee Foundation	Palghar		SCH,WS



**ANNUAL REPORT
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279	MH142	MBA Foundation	Mumbai	022-27795994/ 022-27795995	EIS
280	MH143	Muskan Foundation For People With Multiple Disabilities	Mumbai		PA
281	MH144	Ekata Parents Association	Talegaon Dabhade	9850240873	PA
282	MH145	Punyatma Prabhakar Sharma Seva Mandal	Mumbai	022-26601837	PA
283	MH146	Sangharsh Matimand Vikas Sanstha	Dhule	9881890898	PA
284	MH147	Vishwas Palak Parivaar	Thane	9869472837	PA
285	MH148	Avani Mahila Sanstha	Thane	9869982904/ 8108408790	PA
GUJARAT					
286	GJ101	Society for the Welfare of the Mentally Retarded (SWMR)	Ahmedabad	9825005746/ 9427310530	SCH,GH
287	GJ102	Parents Assn. for Welfare of Mentally Handicapped Children	Junagarh	9825220027/ 9427310530	WS,GH
288	GJ103	Sahyog Waliy Mandal, Sahyog Kushta Yagna Trust	Sabarkantha	02772-254337, 537/ 9825011185	GH
289	GJ104	Sadhna Parents Association of Mentally Challenged Persons	Gandhi Nagar	9879546766/ 9898594350	SCH,WS
290	GJ105	MAVJAT Parents Association of Mentally Challenged Persons and Charitable Trust	Surat	9498703599 9824700310	SCH,WS
291	GJ106	Happy Children Parents Welfare Society	Anand	991300956/ 8460745592	SCH,WS
292	GJ107	Pratibha Parent Assn. for Persons with Special Needs	Valsad	9825148502/ 9429278352	EIS,PA
293	GJ108	ANKUR Special School for MR Children	Bhavnagar	9328286402/ 9924055897	SCH
294	GJ109	Prayas Parents association for Persons with Special Needs	Rajkot	9825054696/ 9426317763	SCH,WS
295	GJ110	AMBA Angles Parents Assn.	Gandhi Nagar	8690775839	WS
296	GJ111	Parishram Charitable Trust	Unjha	9428089033 8487041533	GH,WS
297	GJ112	Shinchan Healing Minds-"karp" Happy Minds Healing Institue	Surat	9825122828	DC
298	GJ113	Astha Academy (Special children)	Surat	7820020041	SCH,WS
299	GJ114	BM Institute	Ahmedabad		GH
300	GJ115	Sabarkantha charitable Trust	Sabarkantha	9998828975	PA
301	GJ116	Het Foundation	Gandhi Nagar	9429092306/9408685405	PA
302	GJ117	Teena Gautam Charitable Trust, Ahmedabad	Ahmedabad	9426446402	PA
303	GJ118	Manav Kalyan Trust-Navsari	Navsari	09825730937	PA
304	GJ119	J.D Patel Pragati Foundation	Gandhinagar		SCH,EIS,SA,PA,DC
305	GJ120	Jaina Anupam N. Parmar Charitable Trust (Managed by: Shree Jalaram Manovikas kendra)	Valsad	02632-224988	DC,WS,SA,PA,EIS
GOA					
306	GA101	CHALLENGE Parents Associations	Goa	9421239772/ 8322443797	PA



SPARK & Co.

CHARTERED ACCOUNTANTS

Audit Report

We have examined the balance sheet of Parivaar, AAATP8059N as at 31.03.2022 and the Income & Expenditure Accounts maintained by the said trust or Institution.

We have obtained all the information & explanations which to the best of our knowledge and belief were necessary for the purpose of the audit.

In our opinion, proper Books of Accounts have been kept by the head office & branches of the above named trust or institution visited by us so far as appears from our examination of the books & proper return adequate for the purpose of audit have been received from branches not visited by us, subject to the comments given below;

In our opinion and to the best of our information, and according to information given to us, the said accounts give a true & fair view :-

- i. In the case of balance sheet, of the state of affairs of the above named trust as at 31.03.2022. and
- ii. In the case of the income & expenditure account excess of income over expenditure of its period ending 31.03.2022.

For,

SPARK & CO.

Chartered Accounts

Anand Pande

CA Anand Pande

Partner

Mem No. 129320

UDIN -22129320AMUEWU9290

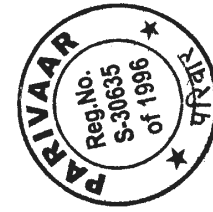


Place : Pune

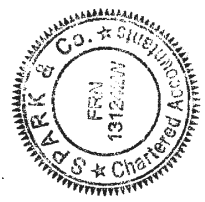
Date : 9th July, 2022



PARIVAAR - Consolidated							Trust Registration No. - S 30635/1996-Delhi			
A-24, Green Acres CHS Sahiniche Vihar Road, Pune Pune-411048							Amount in Rs.			
Consolidated Balance Sheet as on 31st March 2022										
Consolidated as at 31/03/2021	LIABILITIES	Sch No.	General	FCRA	Consolidated as at 31/03/2022	ASSETS	Sch No.	General	FCRA	Consolidated as at 31/03/2022
5,31,574	Capital Account	1	5,37,574	-	5,37,574	Investments	4	26,63,100	-	-
-	Opening Balance		-	-	-	FD with HDFC-		-	-	-
-	Accumulated Surplus op. Balance		-	-	-	FD with Syn Bank - 04254030002771/12		-	-	-
-	Less: Current Year's Expenditure over Income		-	-	-	FD with Syn Bank - 04254030002771/13		-	-	-
6,000	Add: Current Year's Income over Expenditure		7,000	-	7,000	FD with Syn Bank - 04254030002771/14		-	-	-
	Add: Corpus Fund					FD with Syn Bank - 04254030002771/3-B		-	-	-
5,37,574			5,44,574	-	5,44,574	FD with Syn Bank-04254050033383/2-B		-	-	-
20,60,228	General Fund		17,87,749	8,58,526	26,46,275	FD with Syn Bank -04254950000289/1		-	-	-
6,65,279	Opening Balance		3,62,257	-2,40,716	1,21,541	FD with Syn Bank- 53244050070369/1		-	-	-
-79,232	Add: Current Year's Income over Expenditure		-	-	-	FD with Syn Bank-53244050070369/3		-	-	-
	Add: Transfer from General Reserve		-	-	-	FD with Syn Bank - 90044030001300/1-D		-	-	-
	Less: Deficit during the year		-	-	-	FD With Syn Bank - 90044030001300/2-D		-	-	-
	Less: Prior period item		-	-	-	FD with Syndicate Bank - 53244050070369/2		-	-	-
26,46,275		2	21,50,006	6,17,810	27,67,816	F D with Syndicate Bank- 53244050070369/4		26,63,100	-	26,63,100
5,00,000	Earmarked Funds		5,00,000	-	5,00,000			-	-	-
2,00,000	Award RMP - Best NGO		2,00,000	-	2,00,000	Current Assets		-	-	-
7,00,000	Award BDMG - Best NGO		7,00,000	-	7,00,000	Loans & Advances (Asset)		-	-	-
						Cash-in-hand		11,600	11,600	11,600
41,450	Current Liabilities	3	40,000	-	40,000	Bank Accounts	5	7,32,009	6,01,787	13,33,796
-	Provisions		-	-	-	Accrued Interest		7,968	-	7,968
40,000	Audit Fees Payable		-	-	-	TDS Receivable	6	47,875	-	47,875
1,450	TDS on Professional Charges Receivable		18,000	-	18,000			7,89,480	6,17,810	14,07,290
	Sundry Creditors		-	-	-			34,52,580	6,17,810	40,70,390
39,25,299	TOTAL		34,52,580	6,17,810	40,70,390	TOTAL		34,52,580	6,17,810	40,70,390



for PARIVAAR
[Signature]
President



As per my report of even dated
For SPARK & CO
Chartered Accountants
Firm's Registration No. 131242W
CA Anand Pravin Pande, Partner
Membership No: 129320
Place: Pune
Date: 09/07/2022
UDIN - 22129320AMUEW19290



**ANNUAL REPORT
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PARIVAAR - Consolidated
A-24, Green Acres CHS, Salunkhe Vihar road,
Pune-411048

Consolidated Income & Expenditure for the Period Ended 31st March 2022

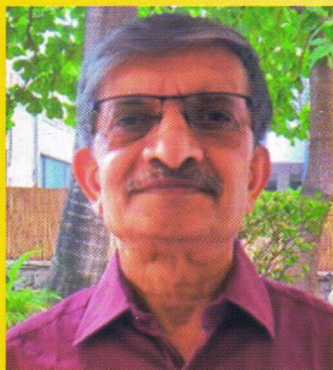
Trust Registration No. - S 30635/1996-Delhi
Amount in Rs.

Consolidated	EXPENDITURE		General	FCRA	Consolidated	INCOME		General	FCRA	Consolidated
	2020-21	2021-22				2020-21	2021-22			
To										
		Project Execution Cost								
		Monthly meeting								
		Self help group								
		Training of PWIDS								
		Counter expenses								
	21,120	RPM Expenses								
	38,882	Salary Expenses	77820							
	57,700	Audit Fees								
	3,950	Bank Charges	3172.08	410.3	3582.38					
	45,000	Benevolence Fund Donated								
	20,000	Capacity training building for parents org.								
	4,51,949	Project Execution -Food								
	1,04,722	Inclusion International Membership Fee								
	19,859	Misc. Expenses								
	6,338	Office Expenses	3202	18155	18155					
	67,218	Petrol Allowance		66117	66117					
	8,983	Postage & courier	15201	15201	15201					
	1,10,198	Printing & Stationery	5039	84174	84174					
	44,963	Repairs & Maintenance	18732	18732	18732					
	20	RTI								
		Professional Charges	3540	3540	3540					
		Stamp Notary	500	500	500					
	15,500	Self Advocacy								
	22,510	T.A CLAIM		58517	58517					
	48,004	Travelling Expenses	4248	4248	4248					
	-4	Round off	38122							
	1,14,470	Honorarium								
	33,254	Mediclinam								
	4,33,480	Murgi Palan		262830	262830					
		Certificate Renewal								
	1,598	Telephone Exps.								
	3,000	Projector rent								
	81,300	Resource person								
	1,505	Advertisement expenses								
	53,030	Baselive Survey								
	16,550	Venue cost								
	7,455	Zoom application charges								
	11,300	Website Maintenance & Renew								
	78,000	Project co ordinator								
	5,86,047	Excess of Income over Expenditure	362257	0	362257					
	25,07,901	TOTAL	5,37,599	22,18,147	21,55,746					
		TOTAL								
		TOTAL	5,37,599	22,18,147	21,55,746					
		TOTAL								
		TOTAL	5,37,599	22,18,147	21,55,746					
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		TOTAL	5,37,599	22,18,147	21,55,746					
		TOTAL								
		TOTAL	5,37,599	22,18,147	21,55,746					
		TOTAL								
		TOTAL	5,37,599	22,18,147	21,55,746</					



LIST OF ABBREVIATIONS

1	BDMG	Smt. Bhagwati Devi & Pt. Gautam Shahji Memorial National Award
2	CCP	Chief Commissioner for Persons with Disabilities
3	CPD	Commissioner for Persons with Disabilities
4	DDRS	Deendayal Disabled Rehabilitation Scheme
5	DIKSHA	Digital Infrastructure & Knowledge Sharing
6	DOE	Department of Expenditure / Ministry Of Finance.
7	LLC	Local Level Committee
8	MGNREGA	Mahatma Gandhi National Rural Employment Guarantee Act
9	MOF	Ministry of Finance, Government of India
10	MOHFW	Ministry of Health and Family Welfare, Government of India
11	MSJE	Ministry of Social Justice and Empowerment, Government of India
12	NCERT	National Council of Educational Research and Training
13	NCPO	National Council of Federation of Parents Organizations
14	NGOs	Non-Governmental Organizations
15	NIEPID	National Institute for the Empowerment of Persons with Intellectual Disabilities
16	NIEPMD	National Institute for Empowerment of Persons with Multiple Disabilities
17	NPM	National Parents Meet
18	PMO	Prime Minister's Office
19	PwD	Person with disabilities
20	PwID	Person with Intellectual disabilities
21	PwIDD	Person with Intellectual & Development Disabilities
22	RDWD Act	Rights of Persons with Disabilities Act 2016
23	RPM	Regional Parents Meet
24	SA	Self-Advocate
25	SAFI	Self-Advocates' Forum of India
26	SWMR	Society for the Welfare of the Mentally Retarded- Ahmedabad



Presidents' adieu...

My last six years in Parivaar, as President, have been truly satisfying and transformational.

I came across so many parents and their children with Intellectual & Developmental Disabilities (IDD), from urban and rural area, each with a different story of hope and despair. The stories helped me to understand varying requirements of our children/families and set priorities. Equally important were the views of Executive Committee members and professionals that I came across from time to time.

I realized that, in practice, dignity and purpose in life for an adult with IDD comes with his/ her worth. So, we were determined to showcase the livelihood & employment potential of our children. Parivaar made a successful attempt to showcase this potential of our children.

An area of concern is residential arrangement for wards when parents are too old to take care or have expired. Parents are facing issues and the National Trust scheme is completely inadequate. This requires more ingenious initiatives from Parents and also persistent efforts to get more funds allocated. Our efforts are only quarter way thru.

The pandemic time brought challenges which Parivaar overcame well, and used technology for meetings and awareness work. In fact, we are now insisting that authorities adopt technology to help our children's 'Learning to Learn' efforts. The virtual technology, digital gaming etc can leapfrog our children's potential to learn.

I also accepted the challenge of putting the house in perfect order to get over the nick pricks of compliances, once for all. Today we are 100% compliant.

I am completing two tenures as President and must hand over the baton as per the rules. I am doing that with a sense of satisfaction having firmly embedded democratic election process where the best gets elected to lead Parivaar.

May my Parivaar blossom more, in future, in the service of Persons with IDD!

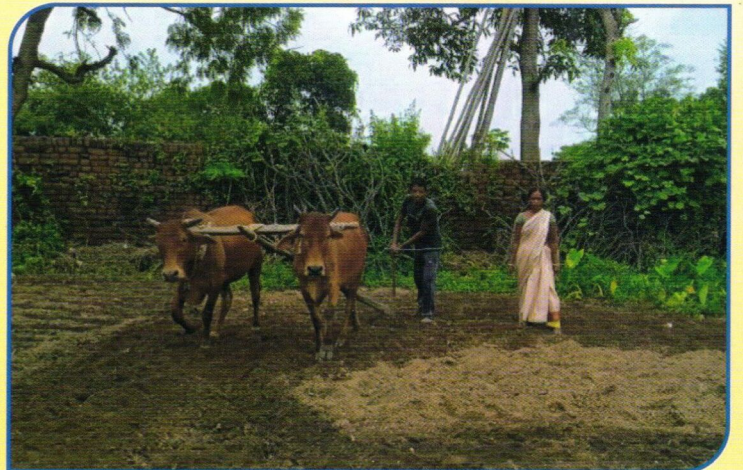
A handwritten signature in black ink, consisting of a stylized 'S' followed by a horizontal line and a small flourish.

Shrirang Bijur

Livehood Project in 5 States in Collaboration with CBM



Planning for Livelihood & Employment



On - The - Job Training For Livelihood



Our Entrepreneur Self - Advocates