

VISION – 2020

The Approach

While there is no precise data on the incidence of disability in India, it is estimated that about 5% of the population suffers from disability of some kind – visual, hearing, orthopaedic or mental retardation based on sample survey done by the National Sample Survey Organisation in 1991.. While the type and pattern of disability may change over the years, there is no indication of decline in the number of persons with disabilities. On the contrary, with life expectancy going up, geriatric disabilities are expected to rise. Similarly, with a declining infant mortality rate, more babies at risk are likely to survive with morbidity and disability. Accidents are also a major factor in the wake of industrialization and development.

2. During the last few years, high priority was given and concerted efforts made towards empowerment of persons with disabilities particularly in the area of outreach to ensure that appropriate rehabilitation services reach persons with disabilities living even in rural and remote areas. This is a daunting and challenging task in a country of the size and diversity of India.

3. By 2020, it is envisioned to have a society which is truly inclusive and egalitarian, where every individual, including persons with disabilities, have equal opportunities for access to the services they need in order to develop to their full potential. Further, the vision is to have a society where all categories of disabled persons are valued and respected as equal citizens and partners in the development and progress of the society, beginning from their families so that they are no longer looked upon either as burdens or liabilities or as targets for pity and charity. After all, a just society is measured by how it treats its most vulnerable citizens and supports their empowerment.

4. A large number of preventable disabilities are occurring at present due to various life style factors including inadequate intake of nutrients including micro nutrients like iodine, vitamin A, iron etc.; unhygienic and insanitary living conditions leading to diseases and morbidity and conditions such as anaemia as well as unscientific birth and rearing practices.

5. By 2020, we envision the creation of an environment where all preventable diseases and disabilities are prevented through a much cleaner, non-polluting, hygienic environment and sanitary living conditions including availability of potable drinking water. All sections of the society and citizens of all regions of the country need to have complete food security and adequate availability of nutritious food including sufficient micro nutrients to live a healthy and disease/disability free life. Children, expectant mothers and others at risk, including aged persons need special care including immunization against all diseases so that there is no consequent disability. By 2020, the society at large will be aware of issues such as the importance of prevention of disability by simple life style changes including sanitation, cost effective but nutritious diets based on locally available food items,

and care of the girl child which has an intergenerational impact on mortality, morbidity and disability.

6. Disability and poverty are closely interlinked. The reach of rehabilitation services at present is far weaker in rural and far flung areas with a much lower estimated coverage compared to the national average. The vision for 2020 is to ensure that the access to services; an egalitarian society and an environment which prevents disabilities is not restricted to urban and semi-urban areas only but is all pervasive, including remote and rural corners of the country. For taking care of persons with severe disabilities, the aged and the infirm, a social security system which reaches even the remotest corners of the country is put in place. Above all, we create a society which is caring to persons with disabilities by removing the mental barriers and attitudinal problems as also the physical barriers which inhibit access of persons with disabilities to public facilities and other services including recreation which are taken for granted by their non-disabled brethren.

The Strategy

Along with the existing legislative framework for persons with disabilities enshrined in the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995; the National Trust for Welfare of persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act 1999 and the Rehabilitation Council of India Act 1992 supportive legislation are envisioned to be adopted in the field of health, education, vocational training, employment to realize fully the provisions of the above three legislation especially those relating to education of persons with disabilities, their economic independence, care giving services to those who need them and their social integration. Other Acts and Rules which are relevant would be reviewed to bring them in consonance with the legislation in the disability sector.

2. Very few buildings, transportation services and other public facilities including roads, stations etc., are at present accessible. One of the critical aspects of provisions of equal opportunities is creation of non-handicapping physical environment. It is envisaged that through appropriate schemes and programmes, almost the entire built infrastructure both in rural and urban areas would be made barrier free and the guidelines and space standards prescribed by Ministry of Urban Development would be implemented in letter and spirit in all buildings and environment outside buildings. Persons with disabilities would be able to access all public facilities and most private building or built infrastructure easily.

3. With the new thrust towards decentralized availability of services, it is envisaged that by 2020 , rehabilitation services as prescribed in the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995, will be available all over the country upto the grassroots level, through an equitable geographical distribution and also by local capacity building and empowerment of the target groups through the National Programme for

Rehabilitation of Persons with Disabilities (NPRPD). Each district in the country will be covered by a District Rehabilitation Centre that will work as a single window facilitation centre for requirements of the persons with disabilities, including provision of appropriate assistive devices, therapeutic services, information on education and placement services, rural development and poverty alleviation schemes etc.

4. The multi-sectoral collaborative approach will need to be strengthened and concretized by convergence of schemes as also by providing funds for persons with disability by all related Ministries/Departments in their Plan outlays. Earmarking of at least 5% funds to be spent for this sector in all Ministries as a sub-Plan is envisaged.

5. Prevention, early detection and timely intervention at the grassroots level is a critical factor. The aim is to greatly strengthen these aspects by 2020 through (a) creation of a service delivery system upto Gram Panchayat level through the Community Based Rehabilitation Worker provided under the NPRPD. (b) Convergence with developmental programme of other Ministries – Women & Child Development, Health & Family Welfare, Education, Rural Development etc.; (c) Awareness generation and empowerment of families with disabled members and their communities.

6. A small percentage of the estimated 15 million children with disabilities are receiving educational services at present. One of the important areas of empowerment of persons with disabilities is their education. The strategy for achieving the vision of an equalization society would be universalization of education. An inclusive education system, which caters to the needs of most of children with special needs will be created. However, for a small proportion of children, special education arrangements (Special schools, home based learning, distant learning) appropriate to the needs of individual children with disabilities would be created. Supportive services like suitable teaching/learning materials, accessible hostels and schools would be provided.

7. These efforts would be supplemented by training of all teachers on disability and development of a large number of rehabilitation professionals through an appropriate infrastructure for it. A University of Rehabilitation Sciences with a large number of colleges and institutions affiliated to it spreading through out India and offering courses at different levels would be in place.

8. The ultimate aim of providing services to persons with disabilities is their socio-economic empowerment and integration. The desirable level of employing 5% disabled persons both in the public sector and private sector through appropriate incentives, as per the provisions of the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act has to be ensured. The economic emancipation through wage or self-employment are a key to rehabilitation of persons with disabilities and promoting a life of dignity and responsibility. It is envisioned that through higher and technical education,

vocational training, financial assistance, persons with disabilities in the employable age group would have appropriate and equal opportunities for placement. The work environment and the tools & instruments would be modified to meet the needs of the persons with disabilities. The private sector would be provided the incentives, concessions and facilities to provide employment to the extent of 5% to the persons with disabilities.

9. Use of scientific methods and appropriate latest technology can make lives of persons with disabilities easier and more productive. Much greater incentives and support will be provided to public and private sector for developing and producing aids & appliances of international standard by utilizing advanced technology and innovative practices. It is also envisioned that a system of social audit and accountability on expenditure for empowerment of persons with disabilities would be in place and the social audit would be done through professionals, community and other knowledgeable people.

10. Information and communication technology will be utilized for establishing a network connecting all district rehabilitation centers with the national and regional level technical institutions which can provide correct information and guidance to persons with disabilities, their families, communities as well as local decision makers and influential persons without necessitating long journeys with consequent costs in terms of time, travel and mobility problems. This would be an effective example of using IT for impacting one of the most vulnerable sections of the population.

APPROACH TO THE DISABILITY SECTOR IN THE X PLAN

While there is no precise data on the incidence of disability in India, it is estimated that about 5% of the population suffers from disability of some kind – visual, hearing, orthopaedic or mental retardation based on sample survey done by the National Sample Survey Organisation in 1991.. While the type and pattern of disability may change over the years, there is no indication of decline in the number of persons with disabilities. On the contrary, with life expectancy going up, geriatric disabilities are expected to rise. Similarly, with a declining infant mortality rate, more babies at risk are likely to survive with morbidity and disability. Accidents are also a major factor in the wake of industrialization and development. During the last few years, high priority was given and concerted efforts made towards empowerment of persons with disabilities particularly in the area of outreach to ensure that appropriate rehabilitation services reach persons with disabilities living even in rural and remote areas. During the X Plan period, it is necessary to strengthen and consolidate outreach and extension programmes through the National Programme for Rehabilitation of Persons with Disabilities (NPRPD) which was launched last year. The aim would be to reach every district in the country with a District Rehabilitation Centre which will work as a single window service delivery as well as facilitation centre for the entire range of requirements of PWDs including therapeutic services, assistive devices as well as information and guidance on education and placement services, rural development and poverty alleviation schemes, etc. This would promote convergence with other developmental programmes and ensure that persons with disabilities are able to access such benefits. . A large number of preventable disabilities are occurring at present due to various life style factors including inadequate intake of nutrients including micro nutrients like iodine, vitamin A, iron etc.; unhygienic and insanitary living conditions leading to diseases, morbidity and disability as well as unscientific birth and rearing practices. During the Tenth Plan period, issues such as sanitation including potable drinking water, food security including micro nutrients, care of the girl child and proper birth and rearing practices need to be highlighted as these would have an inter-generational impact on prevention of mortality, morbidity and disability. The importance of providing barrier free access to public facilities and other services including recreation which are taken for granted by non-disabled citizens to persons with disabilities need emphasis during the 10th Plan. While awareness has to be promoted on these issues, all appropriate authorities providing public facilities have to undertake access audit and ensure that the environment is non-handicapping for persons with disabilities as well as aged persons. The ultimate aim of rehabilitation services is socio-economic empowerment and integration of persons with disabilities into the mainstream of society. The thrust in the Tenth Plan period has, therefore to be towards providing appropriate education, training and employment opportunities to such persons both within the Government for which there is a provision of 3% reservation and also in the private sector which could be encouraged through suitable incentives and concessions for employment of persons with disabilities.