



REHABILITATION OF PERSONS WITH MULTIPLE DISABILITIES IN INDIA

Rehabilitation Science

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ABSTRACT

Rehabilitation of persons with multiple disabilities was earlier considered to be a medical issue to be dealt with by doctors only. Today, the medical model is being replaced by the developmental and sociological model. In recent year's changes in legislation, as reflected in the Right to Persons with Disabilities (RPD) Act 2016, has provided a much needed focus on rehabilitation of persons with multiple disabilities. The National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD) has developed many service models and contributed toward human resource development and research for multiple disabilities. National Trust Act 1999 supports the individuals and families having no parents. Sarva Shiksha Abhiyan has special focus on educational empowerment. However, Rehabilitation is always voluntary, and some individuals may require support with decision-making about rehabilitation choices. Scheme for implementation of Persons with Disabilities Act and National Policy, envisions that every persons with multiple disabilities should have access to appropriate rehabilitation by 2020.

KEYWORDS:

Rehabilitation, Persons with Disabilities, Multiple Disabilities, Multiple Disabilities

INTRODUCTION

Sometimes a word is understood differently by people. More so, if the word is meant to describe an aspect of human condition. The culture, prejudices and environment have a great bearing on the meaning of such words. The words 'handicapped', 'disabled', 'differently abled', 'retarded' have various meanings and carry the potential for prejudicial stereotypes, discrimination and abuse. Disability may relate to body or mind. Also disability can be of a short term or long term nature. Some disabilities may be of permanent nature.

The most acceptable and dynamic definition of disability is provided in the UN Convention on Rights of Persons with Disabilities (UNCRPD) which states that "Persons with Disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others." Though the Constitution of India guarantees equality of all citizens, persons with disabilities have been, in reality, facing stigma, discrimination and neglect due to socio-psychological and cultural reasons. Disability when compounded with discrimination doubles the quantum of disability.

UNDERSTANDING DISABILITY

As we know, disabilities are caused by various factors, some of which are known and some are yet to be ascertained. With regard to the known causes, acts of prevention can help to reduce the incidence of disability both congenital and acquired. The Rights of persons with Disabilities Act (2016) replaces the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995. The new Act includes the 21 conditions under disability. Earlier, the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995, (also referred to as PWD Act, 1995) defines "Person with Disability" as a person suffering from not less than 40% of any disability as certified by a medical authority. The disability being (a) blindness (b) low vision (c) leprosy cured (d) hearing impairment (e) loco-motor disability (f) mental illness (g) mental retardation (h) autism (i) cerebral palsy or (j) a combination of any two or more of g, h) and i) (Section 2 (i) of the PWD Act, 1995 read along with Section 2(j) of The National Trust for Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act, 1999).

According to Census 2011, there are 2.68 crore Persons with Disabilities in India (who constitute 2.21 percent of the total population). Out of the total population of Persons with Disabilities, about 1.50 crore are male and 1.18 crore female. These include persons with visual, hearing, speech and loco-motor disabilities; mental illness, mental retardation, multiple disabilities and other disabilities. The percentage of persons with disabilities in the USA is 12%, in the UK is 18%, in Germany is 9%, in Sri Lanka is 5%, in Pakistan is 9%. This variation is due to the way we estimate disability.

(Table No.-1 Population of Persons with Disabilities in India)

Types of Disabilities	Census, 2011	
	Population	Percentage
Seeing	50.32	18.8
Hearing	50.71	18.9
Speech	19.98	7.5
Movement	54.36	20.3
Mental Retardation	15.05	5.6
Mental illness	7.22	2.7
Multiple Disabilities	21.16	18.4
Other	49.27	7.9
Total	268.10	100

UNDERSTANDING REHABILITATION

Historically, the term has described a range of responses to disability, from interventions to improve body function to more comprehensive measures designed to promote inclusion. Disability is mainly a state subject in India. "Relief of the disabled and unemployable" figures at S.No. 9 in "List II" (State List) in the Seventh Schedule of the Constitution. "Disability" also appears in the 11th & 12th Schedules (pertaining to Panchayats & Municipalities) of the Constitution in this manner. Further, our Constitution ensures equality, freedom, justice and dignity of all citizens of the country including persons with disabilities without any discrimination, which implies an inclusive society for all. In view of Government of India's strong commitment to the empowerment of Persons with Disabilities, in this sector, there are four legislations namely, Rehabilitation Council of India Act, 1992, Right to Persons with Disabilities Act 2016; National Trust for the Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act, 1999 and Mental Health Act, 1997. (Out of these, the first three legislations are dealt in the Ministry of Social Justice and Empowerment and the fourth in the Ministry of Health and Family Welfare.)

POLICIES AND DELIVERY SYSTEMS

Interestingly, there was a paradigm shift in approach towards Persons with Disabilities since the Ninth Five Year Plan, from the earlier welfare based approach to a rights-based approach. The Tenth Plan focused on effective implementation of various provisions of legislation and National Policy for Persons with Disabilities. It advocated a multisectoral and multi-collaborative approach. The National Policy for Persons with Disabilities 2006 recognises the fact that they are a valuable human resource for the country and seeks to create an environment that provides them equal opportunities, protection of their rights and full participation in society. The policies are in consonance with the basic principles of equality, freedom, justice and dignity of all individuals that are enshrined in the Constitution.

To rehabilitate persons with disabilities specially multiple disabilities, the institutional framework in the country consists of office of Chief

Commissioner for Persons with Disabilities, Rehabilitation Council of India, National Trust for the Welfare of Persons with Autism, Cerebral palsy, Mental Retardation and Multiple Disabilities, and nine National Institutes dedicated to different disabilities, fourteen Composite Regional Centers and District-level Centres for Persons with Disabilities and Composite Regional Centres and 199 District Disability Rehabilitation Centres. These organizations are involved in providing rehabilitation services, education, training and research, regulation and developmental activities. The two Central Public Sector Enterprises viz. ALIMCO and NHFDC are involved in manufacture of aids and assistive devices and providing financial assistance for economic empowerment of the PwDs.

Since it is the understanding that the creation of better environment can reduce the hardship of disability, the Central Government has undertaken several initiatives in this area in a planned manner. Some of the important schemes under implementation are enumerated below:-

- a. Deendayal Disabled Rehabilitation Scheme (DDRS), envisages financial assistance to NGOs for providing education, vocational training and rehabilitation of Persons with Disabilities.
- b. Scheme of Assistance to Disabled Persons for Purchase/Fitting of Aids/Appliances (ADIP Scheme), provides grant - in- aid to various implementing agencies (NGOs/National Institutes/DDRCs/ALIMCO/State Handicapped Development Corporations/other local bodies) for purchase/fitting of aids & assistive devices for the physical rehabilitation of PwDs.
- c. Scheme for Implementation of Persons with Disabilities Act (SIPDA), provides grant-in-aid to State Governments, organizations of Central/ State Governments, including autonomous bodies and Universities, for creating barrier free access to their buildings; making websites accessible, and for early detection and diagnosis of hearing impaired.
- d. Scheme of Incentive to Employers in the Private Sector for Providing Employment to Persons with Disabilities, provides employers' contribution for Employees Provident Fund and Employees State Insurance for three years for Persons with Disabilities employees, employed in the private sector with a monthly salary upto Rs.25,000/-
- e. National Scholarship schemes for students with disabilities under National Fund as well as Trust Fund, provide financial assistance to students to pursue post matriculation, professional or technical courses and various skill development courses for their empowerment.
- f. The scheme, Rajiv Gandhi National Fellowship has been introduced on 01.04.2012 to enable students with disabilities to pursue M.Phil/Ph.D courses.

INCREASING HUMAN RESOURCES FOR REHABILITATION

In order to harmonize the requirement of trained human resource the Rehabilitation Council of India, a statutory body has trained so far approximately one lakh professionals in total 16 disciplines from certificate to Ph.D. levels courses. For all level of courses curricula and content are approved by RCI. As on date about 690 institutions including universities, national, apex level institution, NGOs (70-75%) were conducting various courses relating to the disability rehabilitation. Most of the institutes are conducting more than one course with a total of 52 courses. An avg. 1000-1200 trained professional/personnel are passing every year. About 50,000 people are registered with RCI currently (Feb. 2010). Majority of institutions (59%) running the diploma level courses and 39% institution were running the graduate and postgraduate courses.

National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD), Chennai

The National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD) was established in the year 2005, with the objective to serve as a National Resource Centre for empowerment of persons with multiple disabilities. The persons having more than one disability, as mentioned in the PWD Act, 1995 and the National Trust Act, 1999 are provided need based rehabilitation services. The Institute strives to achieve its basic objective of developing human resources in the area through offering M. Phil Degree, Post-graduate Diplomas and a Diploma Programme for catering to the requirements of professionals engaged in providing rehabilitation services to Persons with Multiple Disabilities. Besides, training programmes pertaining to management and empowerment of persons with multiple disabilities were organized for different categories of rehabilitation professionals, parents, teachers and grass root level workers at the district and state levels.

ADDRESSING BARRIERS TO REHABILITATION

The greatest challenge for the Central Government and the State Governments is the achievement of accessibility, inclusion and empowerment for persons with disabilities. The Government alone cannot accomplish this task of making the "Right Real". Tasks to be accomplished are numerous which include-

- a) Changing the mindset and perception of the members of the society so as to have proper understanding of the problems of the persons with disabilities.
- b) Infusing self-esteem and self-confidence in the persons with disabilities themselves so that they know that their limitations can be overcome to a large extent by self-effort and better environment.
- c) Improving the knowledge and skills of persons with disabilities to make them capable of handling different tasks in the employment market.
- d) Motivating various employers within and outside Government sector to employ the PwDs who can perform a number of jobs like other employees.
- e) Mobilizing the voluntary sector to actively participate in the capacity building and rehabilitation and empowerment for PwDs.
- f) Scaling the levels of training, education and research for the benefit of PwDs.
- g) Providing social security systems and other arrangements for making PwDs live with dignity.
- h) Providing them with appropriate assistive devices and appliances at low cost to increase their accessibility.
- i) Including PwDs in the decision making process at various levels for better policy formulation, monitoring and implementation and
- j) Making all out efforts to comply with all the general principles contained in the UNCRPD.

EXPANDING AND DECENTRALIZING SERVICE DELIVERY

Rehabilitation services are often located too far from where a person with a disability lives. Major rehabilitation centres are usually located in urban areas; even basic therapeutic services often are not available in rural areas. Travelling to secondary or tertiary rehabilitation services can be costly and time consuming, and public transport is often not adapted for people with mobility difficulties. Some people with disabilities have complex rehabilitation needs requiring intensive or expert management in tertiary care settings. However the majority of people require fairly low-cost, modest rehabilitation services in primary and secondary health care settings.

CONCLUSION

The priority is to ensure access to appropriate, timely, affordable, and high-quality rehabilitation interventions, consistent with the CRPD, for all those who need them. Governments should develop, implement, and monitor policies, regulatory mechanisms, and standards for rehabilitation services, as well as promoting equal access to those services. Though the road is rough, the time is tough, but our zeal and commitment are immense. We have resources, human and financial. However, the need of the hour is concerted efforts amongst various stakeholders to be made in a time-bound manner. With determination and integrity of purpose, we can overcome the obstacles and convert the expectations of our brothers and sisters with disabilities, into reality.

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