

HELLO, CAN YOU HEAR ME?

Status of deaf children in Assam



Deaf Children's Foundation

A voice for deaf children



The UN Convention on Disability defines disability in the following terms:

Disability is defined in the Convention on the Rights of Persons with Disabilities (2007) as including persons “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.”



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A note from the VAANI Director Mrs Brinda Crishna

VAANI Deaf Children's Foundation has been working in partnership with reputed organisations to provide services for deaf children in the Northeast. As there is very little documented data available about the status of deaf children and the services provided to them by NGOs, individuals and Government agencies, we felt the need for a detailed needs analysis about the status of deaf children and their families, in each of the States where VAANI was running projects.

This is VAANI's attempt to fill this huge lacuna for accurate documented data. We hope that this document will be a comprehensive reference point for all individuals and organisations that require information about services for deaf children in Assam.

We would like to thank the Jamshetji Tata Trust for providing us with the necessary financial support to make this study possible.

About VAANI

VAANI, Deaf Children's Foundation is a registered Trust and works towards bringing language and communication into the lives of deaf children and their families across India. VAANI is one of the very few organisations in India that focuses its work on issues of childhood deafness. All VAANI's training and awareness-generation programmes stress on the role families play in bringing up healthy secure children.

VAANI's head office is in Kolkata and there is a State Resource Centre in Guwahati. Currently VAANI is working with projects in West Bengal, Assam, Meghalaya, Mizoram and Jharkhand.

VAANI's Vision

VAANI's vision is to advocate for the right of every deaf child to a full and complete life with respect and dignity.

VAANI's Mission

VAANI's mission is to promote the entitlement of every deaf child to total and complete access to communication, education, protection and personal safety, equity and equality in all spheres and information and knowledge to reach his or her full potential as an individual and as a member of society.



Introduction

According to the World Bank, 98 percent of all children with disabilities in developing countries are not in school. About 40 million children with disabilities of primary school age are not receiving an education.

It is often difficult to find reliable, documented information on deaf children or adults in developing countries. Finding reliable information on specific sub populations, such as deaf children with additional disabilities, is even more difficult.

Children with hearing impairment and their families constantly experience barriers to the enjoyment of their basic human rights and to their inclusion in society. Their abilities are overlooked, their capacities are underestimated and their needs are given low priority. Yet, the barriers they face are more frequently as a result of the environment in which they live than as a result of their impairment.

In many countries, small, local groups have joined forces to create regional or national organisations that have lobbied for reform and changes to legislation. As a result, one by one the barriers to the participation of persons with deafness as full members of their communities are starting to fall.

Progress has varied, however, both between and within countries. Many countries have not enacted protective legislation at all, resulting in a continued violation of the rights of persons with hearing impairment.

The Deafening Silence...in India

- There are three million deaf children in India
- 25000 children, on an average, are born deaf each year
- Only one in ten deaf children goes to school in India and 90% of deaf children in school, live in urban settlements
- 50% of deaf children in school drop out at the age of 13



Background to the Study

Overall Goal

To conduct a longitudinal study/ situational analysis on deaf children and the communities they live in, in certain states across India

Purpose of this study:

1. To initiate/ conduct a situation analysis on deaf children in the state of Assam.
2. To identify best practices and gaps in the sector of working with deaf children and the communities they live in
3. To gather information in the form of a desk based review, of all available data on deaf children in Assam.
4. To gather qualitative data on the lives of deaf children across the state of Assam
5. To identify potential NGOs working in the sector of deaf children, if possible

VAANI, Deaf Children's Foundation has already done some work in terms of getting basic general information about the situation of deafness in India. The baseline study was initiated to add to their knowledge and getting more in depth information, state wise.

This study helps by gathering an in-depth perspective from the community level – from deaf children/ young adults, their parents, other sources like the census, information about the existing networks and what roles they play and from other studies that might have been done before.

Target groups:

1. Deaf children and young adults
2. NGOs
3. Community
4. From parents of deaf children and deaf adults (to map the services available and their needs)
5. Government policies/ frameworks

Methodology

Desk Review

- A compilation of major relevant policies/ legislations related to deaf children.
- Useful documentation relating to deaf children's protection issues and a compilation of names of other organisations working in the field.
- Existing material (reports/ documents/ research) on deaf children



Field Study

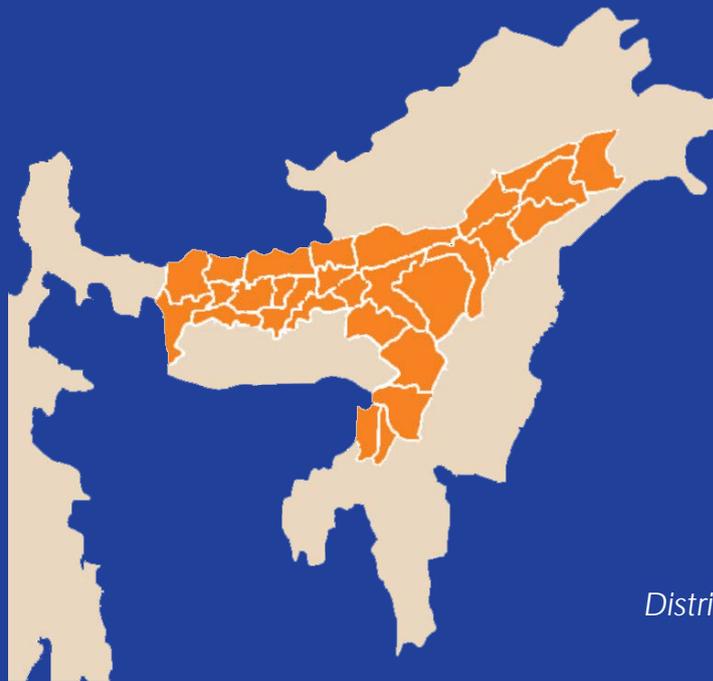
- Field studies conducted with an urban and a rural parents group each in Assam.
- Focus group discussions with deaf children / young adults.
- Group discussions with parents, siblings of deaf children/ community leaders/other key stakeholders including schoolteachers. These would be supported by observation and general discussions with the community. (Sample size – 10 adult stakeholders in each district)
- Meetings/ consultations with key government functionaries from the departments of Social Work and Education
- Visits to NGO centers to understand community based interventions/ interventions designed for deaf children
- Feedback from VAANI partner organisations
- Feedback from participants at VAANI-run training workshops and awareness programmes





Assam

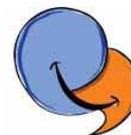
Known as 'Pragjyotishpura' in the Mahabharata ,and also as 'Kamapura' in Medieval times, Assam has a rich green land of rolling plains and stunning dense tracts of tropical forests, interspersed with emerald patchwork quilts of paddy and lush tea gardens enriched by the flow of the river Brahmaputra. It is the gateway to the north eastern part of India and is surrounded by the other Northeastern states of Arunachal Pradesh, Nagaland, Manipur, Mizoram, Tripura and Meghalaya. Assam, with these six other states, are together also referred to as the "seven sisters". Assam shares international borders with Bhutan and Bangladesh. With the capital at Dispur and the State's official language mainly being Assamese and also Bodo, the State is home to various tribes mainly Boro, Karbi, Mishing and Phake and many more, having their own language, script, dance forms and traditions. Today, it comprises of a society that evolved and was augmented with the protocol of the Ahom dynasty . Hence, Assam is also called a *Mosaic of Cultures*. The state is the largest producer of timber and tea in the country and has the oldest oil refinery in India. The handloom and cane craft industry of Assam today has made a name internationally.



District map of Assam

The population of Assam comprises 26,655,528 persons – with an urban population of 3,439,240 persons and a rural population of 23,216,288 persons¹.

¹ Census of India 2001



Demographic Profile:

The state of Assam has **27 districts** (including 4 new districts of BTAD) with Kamrup (Rural and Metropolitan) district being the most populous accounting 8.92 % of the total population of the state.

The population density is highest in the Nagaon district having 604 persons per sq.km whereas in the North Cachar Hills, population density is only 38 persons per sq.km. The literacy rate is highest in Jorhat district (77.91 %) and is lowest in Dhubri district (49.86%). (Census 2001)

There are Tribal (Bodoland, etc.) and Hill (Karbi Anglong and N.C. Hills) Autonomous Councils in which Panchayati Raj system is not in force. Most of the departments including Health & Family Welfare have been transferred by Govt. of Assam to be run by the Autonomous council.

In the Hill districts, the Principal Secretary of the Autonomous Council is the Chairman of all health and family welfare committees (Society).

In the plain districts, the Deputy Commissioner is the Chairman of District Health & Family Welfare Society / other Committees.

There are **219 development blocks, 2,490 Gaon Panchayats and 26,247 revenue villages.** (Census 2001)

Background Characteristics	Data
Geographic Area (in Sq. Kms)	78438
Total population (Census 2001)	26655528
Population Urban	3439240 (12.90%)
Population Rural	23216288(87.09%)
Population Female (15-49 yrs.) – Total	6574794
Population Female (15-49 yrs.) – Urban	939909
Population Female (15-49 yrs.) – Rural	5634885
Population (0-6 yrs.) – Total	4498075
Population (0-6 yrs.) – Male	2289116
Population (0-6 yrs.) – Female	2208959
SC Population	1825949 (6.85%)
ST Population	3308570 (12.41%)
Male Population	13777037 (51.68%)
Female Population	12878491 (48.31%)



Decadal Growth Rate	18.85
Area (Sq.Km.)	78438
Population density	339
Literacy rate Total	63.25
Literacy rate – Male	71.28
Literacy rate – Female	54.61
Sex Ratio – Total	935/ 1000
BPL population	36.09 %. (1999-2000, Planning Commission Estimates)
Religion	Predominant-Hinduism, Islam, & Christianity
Language spoken	Assamese, Boro, Bengali, Hindi, English

Some Basic Facts

There are 468113² people with disabilities (PWD) in Rural Areas and 62187 people with disabilities (PWD) in Urban Areas in Assam.

Total Disabled Population in Assam, Gender-wise:

Total Disabled Population in Assam	530,300	Male	Female
VI (Visually Handicapped)	282,056	154136	127920
Speech disability	56,974	31783	25191
HI (Hearing Impairment)	51,825	27554	24271
PH (Physically Handicapped)	91,970	56386	35584
MR (Mental Retardation)	47,475	27657	19818

The above table shows that there are a total of 5,30,300 disabled people out of which 51,825 are people with Hearing loss. This is equivalent to 10% of total disabled population within the State. The break-up of literacy of this, 53.1% are males with hearing loss and remaining 46.9% are females with hearing loss. The literacy rate amongst persons with hearing loss is as low as 38.9% within the State. About 87% of Assam's population resides in rural areas, where there is a higher concentration of deaf population.

² State and district-wise data from the Sarba Siksha Abhijan Mission, Assam and Census of India 2001



Distribution of People with Disabilities in Rural and Urban areas

Type of Disability	Literate		Illiterate	
	Rural	Urban	Rural	Urban
VI (Visually Handicapped)	117,576	28,149	126,527	9,804
Speech disability (SD)	12,168	2,589	39,398	2,819
HI (Hearing Impairment)	18,044	2,137	30,230	1,414
PH (Physically Handicapped)	35,695	6,179	47,166	2,930
MR (Mental Retardation)	15,098	3,562	26,211	2,604

Classification of People with Disabilities by Age Groups

The age break down of deaf population within the state suggests that only 16.9% are found to be children within the ages of 0-14 years, with no clarity on the number of children within the age group of 0-5 years, critical in relation to early intervention. The remaining 83.1% includes deaf population within the ages of 14- 60 years as per census data of the State.

Type of Disability	0 – 14	14 - 59	60 plus	Age not recorded
VI	81121	126038	36544	400
SD	15327	32940	3249	50
HI	8158	23567	16461	88
PH	19536	43715	19449	161
MR	6076	29871	5307	55

(Source: Statistics Department of Assam – all population data)

Classification of People with Disabilities by Literacy Levels

Type of Disability	Literate	Illiterate
VI (Visually Handicapped)	145,725	136,331
Speech disability (SD)	14,757	42,217
HI (Hearing Impairment)	20,181	31,644
PH (Physically Handicapped)	41,874	50,096
MR (Mental Retardation)	18,660	28,815



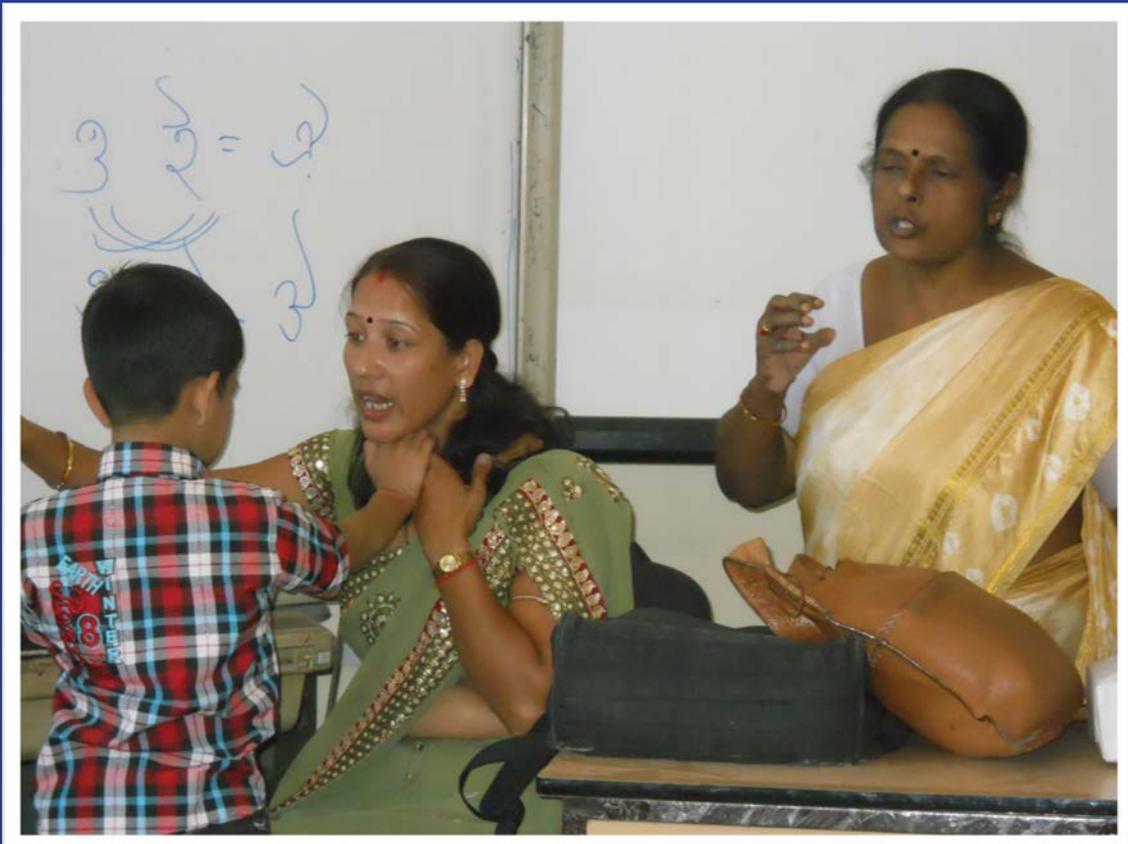
District wise Classification of HI children (6 □ 14 yrs.) 2007-08 as per Inclusive Education Department (IED) of SSA Record

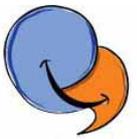
No.	District	Hearing Impaired children			Enrolled		
		Boys	Girls	Total	Boys	Girls	Total
1	Barpeta	614	416	1030	360	343	703
2	Bongaigaon	348	284	632	282	221	503
3	Cachar	450	422	872	285	291	576
4	Darrang	410	408	818	393	334	727
5	Dhemaji	380	277	657	205	164	369
6	Dhubri	487	491	978	442	299	741
7	Dibrugarh	443	201	644	250	198	448
8	Goalpara	397	345	742	185	167	352
9	Golaghat	422	288	710	327	207	534
10	Hailakandi	261	220	481	248	205	453
11	Jorhat	294	218	512	207	156	363
12	Kamrup	773	544	1317	498	342	840
13	Karbi Anglong	356	254	610	197	132	329
14	Karimgang	417	309	726	247	159	406
15	Kokrajhar	372	272	644	357	221	578
16	Lakhimpur	351	229	580	260	155	415
17	Morigaon	431	243	674	304	172	476
18	N.C. Hills	52	42	94	20	14	34
19	Nagaon	1302	1087	2387	1069	890	1959
20	Nalbari	620	463	1083	374	280	654
21	Sivasagar	338	233	571	236	195	431
22	Sonitpur	548	384	932	376	246	622
23	Tinsukia	363	273	636	283	207	490
	TOTAL	10429	7903	18332	7405	5598	13003



The information on children with HI within the age group of 6-14 years from the SSA suggests that there are a total of 18,332 children with Hearing loss, out of which 56.8% are male and 43.2% are females. The enrolment rate amongst males and females within the age group averages almost 71%, hence it can be inferred that the National programme for Education of Girls at Elementary Level, under the SSA, has impacted the overall enrolment rates amongst female children.

However if one compares the enrolment rates with retention rates of children and the overall literacy rates amongst deaf population which is 38.9%, then the picture isn't as encouraging. The need to stress more on quality educational inputs being tailor-made to suit the needs of deaf children would need to be woven into the framework of national and state level programmes designed to reach out to all Children with Special Needs (CWSN).





Key Findings from the Study

A majority of studies reflect a relative neglect of people with disabilities through weak institutions and poor accountability mechanisms, lack of awareness among providers, communities and People with Disability (PWD) of their rights, and failure to involve the non-governmental sector more intensively. Most importantly, PWD themselves remain largely outside the policy and implementation framework, at best clients rather than active participants in development. There is also evidence in key areas like employment that deaf people are falling further behind the rest of the population, risking deepening their already significant poverty and social marginalisation. The slow progress in expanding opportunities for disabled people in India results in substantial losses to people with disabilities themselves, and to society and the economy at large in terms of under-developed human capital, loss of output from productive disabled people, and impacts on households and communities.

More visible disabilities like mental retardation, locomotive disabilities and vision loss are prioritised upon by NGOs/ development agencies working within the State.

Some of the significant findings from the study, gathered through interactions with deaf children/ youth, children/ youth with no hearing impairment, parents of deaf children (in rural and urban settings), community adults, staff of NGOs running interventions for deaf and other disabled children as well as policy makers are highlighted below.

There is no state level research study that exists on the situation of deaf children. The little information that is available is localised – largely in the context of the NGO's area of operation/ work. The remaining information could be collected from the SSA, though this would include only school going children between the age group of 6-14 years. The problem remains with gathering information on children falling outside the education net/out of school children and younger children within the age group of 0-5 years.

We hope that this report will fill that gap substantially.

Identifying deafness

Assam reflected similar findings through the situation analysis as the two other States where VAANI conducted similar studies. Identification of deafness amongst children happened rather late in life – that is when the child was more than 3 years old. The Anganwadi /ICDS workers who are the caregivers of children in the rural areas have very little idea on how to identify a deaf child in the age group 0 to 6 years. Specialist facilities for the deaf – especially children – are very few – and mostly focus on urban conglomerations as reflected in discussions with various adult stakeholders, including parents and



NGO staff. Though an estimate on the number of disabled children including deaf children in the age group of 0-5 years, lies with the Social welfare department the situation on ground suggests a completely different story, while trying to identify and track these children. In Assam too, there is very little data on the number of deaf children between the age group of 0-5 years was not available from the social welfare department.

In most rural areas, facilities for testing and rehabilitation of deaf children are few and far between. These are combined with facilities for other disabilities as well, as was seen during the course of this study.

ENT Specialists and Audiologists in District Hospitals

According to the Assam Rural Health Services Directory), there are 39 ENT specialists across 23 district hospitals with no ENT Specialists in Barpeta and Morigaon District Hospitals.

Barpeta is a district with a large number of deaf children in Assam, in the age group of 6-14 years but does not have an ENT specialist in its district hospital.

Kamrup	JR Bafna Dist Hosp , Amingaon has 2 ENT specialists
Kamrup Metro	Mahendra Mohan Civil Hospital has one ENT Specialist
Nalbari	SMK Civil Hospital Has 3 ENT Specialists

As per information we gathered from Guwahati Medical College and from parents, Assam's district hospitals have no audiologists. The Composite Regional Centre at Guwahati and the Guwahati Medical College has audiological facilities. The State Hospital i.e. Mohendra Mohan Chowdhury Hospital at Guwahati also has audiological facilities. Audiological facilities are also available in private hospitals and Clinics in Guwahati & Nalbari which would cost the family about Rs. 150 only for the tests. The SSA has audiometers since 2010, which are used to do the initial audiological assessments in the districts.

Public Health Infrastructure:

Sl	Health Facility	Number (Source- Facility Survey, State Report)
1	Medical Colleges	4
2	State Level Hospital	1 (MMC Hospital in Guwahati)
3	District Hospital (DH)	21
4	Sub Divisional Hospitals (SDH)	13 (FRU – 3)
5	CHC(Community Health Centre)	108 (FRU-36)
6	PHC (including Block PHC)	844



7	Sub-Centre	4592
8	B.Sc. Nursing Colleges	1
9	GNM Training Centres	15
10	ANM Training Centres	18

District-wise Health Infrastructure break-up is given in [Annexure – 2](#)

Functionality of the health facilities:

Sl. No.	Health Facility	Number (Source- Facility Survey, State Report)
1	No. functioning as FRU	39
2	No. functioning as 24x7	343
3	No. of SC functioning with at least one ANM	4592

Services for deaf children and their families

A visit to Swabalambi, an NGO working in Kamrup District, by the VAANI Consultant during the course of this study brought out the issue of Identity cards for children. Under the PWD act, disabled adults and children are entitled to an Identity card, to avail of subsidies from the State government. Mothers – who form part of the 'Inclusive' women's self-help groups in the various rural project areas of Swabalambi mentioned that obtaining I-cards for their deaf child was quite problematic – since a lot of paper work needed to be done apart from running from pillar to post. The older mothers stated that until a few years ago (approximately 7-8 years), the procedure was much more simplistic. However, no other facilities are available from the government.

Services rendered in the RRCs (Regional Rehabilitation Centres at Dibrugarh, Silchar, Goalpara and Guwahati) under the Department of Social Welfare

1. Physical Medicine and Rehabilitation Services
2. Physiotherapy and Occupational Therapy
3. **Speech Therapy and Audiological Rehabilitation**
4. Clinical Psychology- Psychological Assessment, Behavior Modification, Guidance and Counseling
5. Speech education – for the Mentally Retarded, Hearing Impaired, and Visually Impaired.
6. Orientation and Mobility Training for Visually Impaired
7. Vocational Rehabilitation
8. Prosthetic and Orthotic Services



In the urban areas, services are considered no better. In general, parents mentioned that levels of awareness are higher as compared to rural areas though access to facilities is still a major issue especially the process of obtaining the Disability Card in Assam. Urban interventions mainly comprised of schooling initiatives – mostly exclusive – for deaf children. These include innovative teaching methods as well – though the validity of these teaching methods is beyond the remit of this study. The SSA is trying to facilitate the CWSN in getting the Disability Certificates in a phased out manner since a lot of CWSN were yet to get it as of June 2011.

Inclusion within families

Most parents belonging to the lower socio economic strata mentioned that they had difficulties in communicating with their children in the early days, when deafness in their child/ children was identified. However, over time, they developed various kinds of signs – to get the message across. This would pertain mainly to day to day communication between children and adults – and siblings of deaf children. It did not extend to developing a larger vocabulary of words or understanding meanings. It is unclear what children or adults do when they find themselves in situations where there is problem.

Organisations like Sarothi and Swabalambi, have begun to understand the need to involve parents in the development of the deaf children and so are providing training in communication skills as part of their activities.

There was more initiative and enthusiasm observed within Parent groups, informally formed by parents (in most instances mothers) of deaf children. In Swabalambi, there has been a concerted effort to form inclusive groups – groups comprising of the mothers of disabled children. However, the formation of such inclusive groups, while highlighting / created awareness on disability, appeared to have no direct benefits that percolated to the particular disabled child/ young adult through the economics of being a member of the group. In an ideal situation, it is felt that gaining membership to such a group should lead to direct benefits to the disabled child.

Some of the mothers in the urban project areas in Guwahati mentioned that deaf children often got frustrated when they were not understood – this escalated when the children reached adolescence

Mothers felt that there was such a dearth of information on deafness that beginning with the basics, of identifying deafness in their child, to accessing facilities and ensuring a secure future for their child was a far off possibility. In a training program conducted by a resource person from West Bengal, the lack of knowledge and the sheer uncertainty amongst parents on how to approach deafness, leave alone addressing the requirements – was alarming. A mother of a Class X student lamented that if she had even as much basic



knowledge as shared in the training program, when her son was an infant, he would have been much better off today.

In the past few years, there have been informal parents' groups formed by mothers of deaf children who meet regularly

- To discuss the problems they have in dealing with their deaf child and also to share emotions/ feelings amongst themselves
- To share with each other any information that may benefit the deaf children.
- To brush up on the communication skills and knowledge that they gained in the various workshops
- To support and help new parents of deaf children by sharing their experiences and knowledge
- To discuss issues like the process to obtain the Disability Card; and to persuade the Government to simplify the process
- To gain knowledge and skill on formalising their group

Sign versus speech skills

In the rural areas, a majority of the parents that the research team met preferred the use of speech skills over sign language. More often than not, the parents' quest for normalcy often turns out to be detrimental to the child's development of communication skills. Large-scale debates exist on whether children should be taught oral skills or sign language. Sign language, unfortunately, is viewed by many parents as a stigma.

For those who have worked closely with the world of deaf children, it is evident that there is no either-or situation. A child/young adult has to be equipped with both sign and oral skills – to enable her/ him to operate in different contexts.

Through VAANI's workshops, parents have come across several deaf role models who have been an inspiring force for parents to get rid of the stigma of using signs to communicate. Parents in Assam have realized that the use of both- sign and speech helps a deaf child communicate more effectively. There is now a great demand from parents for more training sessions on the Indian Sign Language.

Organisations working with disabilities in the State

VAANI, Deaf Children's Foundation through its partners in the districts of Kamrup and Nalbari are trying to reach the workers in the field to spread awareness and in building the skills on early identification of deaf children and involving parents and families in the growth and development of the child. Community based rehabilitation workers of VAANI's partner organisations identify/facilitate the identification of deaf children and link them during school enrolment camps organized by the SSA. These children once admitted into school are followed up through regularised home visits and center-based



services, which ensure that children are retained in schools. Regular follow-ups at the schools and inputs provided at home/ centers helps to track each child's progress and plan further inputs to be provided to individual children. Linkages with other service providers are done to ensure the holistic development of the child.

There are many organizations working on disability in Assam.

Shishu Sarothi is one of the premier institutions in Assam addressing issues of disability, primarily focused on children with cerebral palsy and working with an institution-based as well as community based approach. Interestingly, Shishu Sarothi is the only known face of Assam – outside of the State – working on disability issues. The institution does have plans to address issues of deafness amongst children – in a focused manner – in the coming years. Their current focus on deafness is limited to children with cerebral palsy who also test affirmative for hearing impairment.

Details of other NGOs providing services for people with disability are given in [Annexure- 3](#).

In terms of a best practice model unique to Assam, **the Disability Law Unit**, set up to fight legal issues for disabled persons, was the only 'different' unit found during the course of this study. The DLU, housed within Shishu Sarothi, is mainly involved with litigation for disabled persons. The Unit has filed 3 Public Interest Litigations on behalf of disabled persons and has been successful. Besides litigations, the Unit has also played a major role in spreading awareness on disability through the media. The Unit organised a policy change consultation on the Eleventh 5 year plan and toward amendments on the PWD Act.

Inclusion at the school / college level

The inclusion of students who are deaf refers to their being educated within a classroom where students with normal hearing also study. For the purpose of this research, inclusion differs from 'mainstreaming' in that mainstreaming refers to a variety of degrees of contact with hearing students/ adults. Inclusion may involve an assortment of services such as interpreters, note takers, teaching aids and teachers of students who are deaf.

Education for the deaf, in India today, is still a problem. An oft-repeated statement was 'They may attain the certificate for passing Class X but they are unable to string three sentences together'. Most special schools for deaf children promote either sign language or oral skills. A few promote inclusive modes of education while some special schools promote mainstreaming of deaf children.

In Assam, there are two government schools for the deaf children:

1. **The Bhawri Devi Sarawgi Government Deaf School** at Kahilipara in Guwahati provides free special education to hearing impaired children, both boys and girls of the age group 6 to 16 years up to



H.S.L.C. Standard. The school has hostel facility and has the capacity for an intake of 250 students. There are around 20/22 special teachers to attend to the needs of the students. It has been observed that the students in the school use mostly signs to communicate. Until three four years back, this being the only school providing education for the deaf children in Assam, children across Assam who manage to get admission attend the school. The children who attend the school are mostly from rural as well as semi urban (town) areas.

2. **School for Hearing Impaired in Jorhat** imparts education for hearing impaired students from preparatory to class VIII and has a capacity of 60 students.

Besides these two schools, other private schools within Assam are:

1. At the **Saraswati Bagdhwani** school for deaf children, set up in early 2000, children and adults with hearing impairment are trained in speech skills, through the use of a scientific therapy(as referred to by the Principal) – a combination of sign, vibration and feelings (more akin to the Cued Speech Method). The school is named after this scientific therapy and has deaf children and adults ranging from the ages of 3 to 18. Amongst the school going age group, each class has 3-8 students.. Children come from all over Assam, for which the school has also set up a hostel facility. It remains the only one of its kind of school across Assam.
2. The **Association for the Deaf** set up in 1967 use to cater to 10 deaf children through a special school, the 'School for the Deaf' which began in 2006-07. It is now renamed as the 'College for the Deaf and was set up by the Assam Bodhir Santha located in Kalapahar. It has higher secondary education facilities for deaf children.
3. A semi-government run institution, the **Montfort Inclusive School**, 9th Mile Jorabat, Guwahati, has facilities for education of deaf children in an inclusive set up with English as the medium of instruction. The intake capacity of the school is 500 students. There are about 10 deaf children with two teachers of the deaf and follows total communication methods.
4. 'Sahayika' at Bamunimaidan in Guwahati, primarily catering to the needs of the mentally retarded children, also has a few deaf children attending the school where a teacher is assigned to help them orally and by using visual clues.



Other schools like Sahayika which primarily caters to the needs of other types of disabilities but also have deaf children attending them are:

5. Kachajuli Physically handicapped School and Training Centre, Lakhimpur
6. Dhula Regional Physically Handicapped Development Association, Darrang
7. Asha School, Narengi, Guwahati.

Deaf children who attend special schools, especially boarding schools, are isolated from their families and communities and, in many instances, receive an education that is largely inappropriate to their needs. In addition, Special schools are only able to limited numbers of children due to space/ funding constraints.

A key to this is that the family, school and community need to share the ideas and goals of education and inclusion in order to create the necessary conditions for community level inclusion. If children do not experience inclusion in the family and community, then inclusion in the local school is very limited.

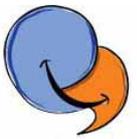
Language for communication

Most young deaf children have hearing parents, thus they learn their sign language from people who are themselves learning it. At school, most of their teachers will be hearing and thus, although they may have good signing skills, are not native users of the language. In addition, those deaf people who work in schools and are native users of the language may adjust their signing to take account of the hearing people with whom they work. The other children with whom they come into contact are mostly in the same position, and thus they do not always provide good models of the language.

Most deaf children have only partial accessibility to language. Where speech skills are given paramount importance (which is in about 90% of the instances), only one language is taught. This often restricts the child/ young adult from knowing or learning another language – and in a state such as Assam, acts as a barrier in appearing for public exams. Unlike the state of Karnataka, in Assam, young adults appearing for their Class X or Class XII exams are expected to take their exams in one additional language, besides their language of preference, under the Assam Higher education Board norms. This often results in dropouts amongst the extremely few children who reach that level – due to the difficulty in coping with a 2-language system.

The schools where deaf children study largely follow a teacher-centric mode of imparting knowledge, with a greater emphasis on completing the syllabus (as required by the education system) than a focus on the learning process.

Due to lack of awareness and remoteness of services in rural areas, coupled with the absence of educational services, deaf children start school at the age of seven, or even later. They therefore have limited opportunities for



language development in the crucial pre-school years, with the exception of the 10% of children who are born to deaf parents and are exposed to sign language from an early age.

Visits to projects in urban as well as rural areas in Assam reflected the fact that awareness through government programs pertaining to identifying and addressing deafness in children was very low. Most parents stated that their child's deafness was identified quite late. Aids and appliances for children with mild to partial deafness are expensive and it is a cumbersome and expensive process for parents to travel from their homes in rural areas all the way to town to obtain the aids or their repair, if problems arise in the use of these aids.

Most parents also said it was difficult to send their child to regular school – since the teacher at the local government school had a large number of children in their classroom (60 children on an average) and it was very difficult to pay attention to the needs of a deaf child. Besides this, deaf children are possibly first generation learners in their family, and hence are unable access meaningful support from their parents or guardians.

The absence of sign language and additional support from the family and other adults in the community further results in keeping the child out of school, and to a large extent, isolated.

Except for NGO interventions – which are largely piecemeal in the sense of training parents to communicate with their deaf child and gaining acceptance within the family, not much work is being done at the school or community level, at present.

In urban as well as rural areas, it was the mothers who primarily attended language/ communication classes held by the concerned NGO. Fathers most times were either busy in the fields or as daily wage labourers or else were not interested.

Parent groups are being initiated in Assam by VAANI– within localised pockets – in bringing deaf children's issues to the fore. As mentioned earlier, they have been instrumental in spreading awareness and acting as role models for other parents. Some parents from Guwahati have come forward to assist the VAANI team during workshops. They have been trying to motivate more parents to form a group and are beginning to work out the process of formalizing the group.



"My only dream is to see my child develop into a contributing member of society." said Roshida Khatun mother of Rakibul.

Rakibul is an eight year old deaf child. His father is a teacher in Bongaigaon district. The mother is staying in Kahilipara with her son who is studying in Govt. Deaf School.



The father sadly said that in spite of being a teacher in a school for many years and having taught so many children, he was not able to help his own son in his studies. He said that he had a mind block and didn't know how to go about teaching a deaf child. In the workshop Rakibul's mother cried and reinforced similar sentiments. She was very worried and uncertain about the future of her child and was totally lost. Rakibul's mother said that she has come a long way since the first workshop she attended in the month of April 2010. She said: " *At first when I admitted my deaf child to school I thought that the teachers support in the school was enough for my child as I had no knowledge or idea on how to teach my deaf child. I lacked confidence in teaching my own son. But since VAANI came into our life things changed for better. I have attended all workshops that have been conducted by VAANI, and I am now more confident and able to work with my child consistently with what I have learnt through the workshop.*"

She goes on to say, " *I am very happy looking at the language development of my deaf child. Now he has a vocabulary of many fruits, vegetables, animals, body parts, dress, and many more. Not only that, my child has come first in the class in his annual exam. I now see my child can survive and has a more secure future..... thanks to the support we received from VAANI Deaf Children's Foundation. My husband and I now realize that the most important thing for us to continue doing is to communicate with our deaf child.*"

She now feels empowered to help other parents like herself to support their deaf children. She goes on to say " *I will be sharing all the information and knowledge that I have received from VAANI with other new parents so that they too can create a better future for their deaf child. To begin with I would like to tell every parent of a deaf child to communicate with their child by teaching them the names and meanings of every objects around them and instilling the sense of curiosity in their minds. "*



The Role of the Government

The district level Government functionaries involved with services to people with disability are the District Disability Commissioner and the District Disability Welfare Officer.

During the initial study, the then Joint Director, Social Welfare, provided some inputs on the existing schemes for deaf children in Assam. Unlike some of the southern states that have set up one website on the welfare schemes for the disabled and another for information on job vacancies, this is yet to be enforced in the state of Assam for the public at large.

Role of the social welfare department □

As per 2009- 2010 records, the Department of Social Welfare Assam has provided Disability Certificates to one lakh fifty thousand persons with disabilities.

There is no specific information maintained/ compiled with the division on the number of HI children that have received Disability Certificates.

- **Assistance to Disabled Persons for Purchase/Fitting of Aids/Appliances (ADIP Scheme)**
The Social Welfare Department ensures that Hearing Aids are distributed through the ADIP Scheme. ALIMCO distributes the Hearing Aids through Camps which are facilitated by SSA
- **Scheme to receive hearing aids through the SSA**
Hearing aids to children between the age group of 6-14 years are provided through the SSA.

Access to government services

Government schemes other than the People with Disability Act

- a) NHFDC- National Handicap Development Corporation under Department of women and child development provides vocational/ skill training for Children with special needs (CwSN)
- b) Under the Social welfare Department, scholarships are available for children from standard IX onwards (for CwSN)
- c) Under the Department of Mass Education scholarships are available for students from standard IX



Given below are a few Government schemes that are available for deaf children:

Sl. No.	Name of Scheme/Institute	Details of Scheme	Facilities Provided	No. of Beneficiaries
1	BDS Govt School for the Deaf, Kahilipara	Free education to Hearing Impaired children (6 – 16 yrs) to prepare students for HSLC Examination	(i) Hostel facilities for boys and girls (ii) Vocational training to HI children (iii) Scholarship @ Rs 200 pm	250
2	School for Hearing Impaired, Jorhat.	Imparts education to HI children from Classes I to VIII	Scholarship @ Rs 200 pm	60
3	TCPC, Boko	Provides Training for Disabled Person	Stipend @ Rs 150 pm per inmate	16
4	Stipend to Disabled Students	Offers a scholarship @Rs.200 pm to students with disabilities studying in various schools and institutions run by NGOs		500
5	Recurring Grants –in-aid to Assam Andha Sishu Vidyalaya, Bihupuria, Lakhimpur	Maintenance Grants- Scholarship @ Rs200 pm per student	Imparts education for Blind Students through the NGO	60
6	Recurring Grants –in-aid to Mental Welfare Society, Guwahati	Maintenance Grants- Scholarship @ Rs200 pm per student	Imparts Education to mentally challenged children upto 16 years of age.	50
7	Rehabilitation Grant		Rehabilitation to PWDs in the age group 18 -45 yrs in General, SC & ST	300
8	Vocational Rehabilitation Centre at Barpeta	Newly established centre in collaboration with United Disabled Sangram Parishad during 2004-05	Training in Cutting, Tailoring Weaving etc,	100

(Source: Department of Social Welfare, Assam)



Sarva Shiksha Abhiyan

The other key government department intervening for the benefit of the disabled in general is the Sarva Shiksha Abhiyan.

Resource teachers for Hearing Impaired people (HI) within SSA, Assam

Resource Teachers in Assam - 292

Volunteers – 2802

Resource Persons – 53

Prior to 2008, SSA's intervention was for the benefit of the disabled prioritized locomotor and visual disability. The intervention received for deaf children was limited to the distribution of hearing aids with little understanding that hearing aids is not effective without ear moulds and without proper assessment of each child's hearing loss and also without any follow up of Audiological training or speech therapy. A better understanding ensued only after a Seminar and Orientation on Deafness by VAANI. Now SSA Resource Centres are well equipped with Audiometers and information on sources from where ear moulds can be obtained. Resource Teachers are being given inputs on speech therapy, Sign Language and techniques of imparting communication skills which help in the development of language of a deaf child.

One needs to keep in mind that the barrier in the case of a deaf child is communication a non-physical one and the fact remains that the SSA does not cover children from the age group 0 to 5 years; the most crucial years when early communication is essential for language development of a child.

From July 2010 onwards, SSA Assam has facilitated the process of obtaining the Disability Certificates by collaborating with the Social Welfare Department of Assam.

Number of Disabled Children Identified and covered under the SSA (a comparative between 3 states):

State	CWSN identified	Enrolled in schools	% enrolled in schools	Enrolled in EGS Centers	CWSN provided home based education	%CWSN covered against identified CWSN
West Bengal	140699	115834	82.33	14134	10731	100.00
Assam	106209	66780	62.88	4208	11216	77.40
Karnataka	129491	117401	90.66	-	10327	98.64

Source: Punarbhava – National Interactive Portal on Disability:



Obtaining Disability Certificates through SSA

Step1: The following first four documents are required with the form which needs to be submitted to the Welfare Department in order to obtain the Disability Card .

- Audilogram (Facilitated by SSA RPs in the blocks)
- Birth Certificate (helped by SSA volunteers and ICDS workers - on where it can be obtained from – for those who did not have it)
- Blood Group Report (individually from any Lab)
- 4 Passport size photographs
- Income Certificate (in case of procurement of free hearing aids & availing the Scholarship also)- obtained from the Circle Office under which the Block falls

Step2:

After submission of the form, the CWSN has to appear before a Medical Board (which has begun sitting regularly twice a month since July' 10; arranged by SSA in collaboration with the Welfare Department). The children who need to appear are notified prior to the date of appearing.

Step 3:

After confirmation by the Medical Board, Disability Certificates are issued within a month from the Social Welfare Department. The certificates are collected from the Social Welfare Department and then distributed to the CWSN.

Role of NGOs

The funding being provided by major national and international donors on disability focuses mainly on networking and advocacy to promote the rights of disabled people and encourage the formation of Disabled Peoples organisations at the district and state level. However what is a glaring reality, though unfortunate is the minuscule deaf adults who are “included” within these groups, and they remain largely marginalized within these support groups. The main reason lies possibly because of stereotypical way of viewing communication as being only verbal, and the limitations of projects, not emphasizing on holistic based capacity building supports.

Those who fund projects which cater to specialized support to children usually get confined within their area of operation, hence unable to provide equal support and services to all children with special needs, within a village, block, district or state. Further the strategy of running special schools, much like governmental institutions; don't focus on the involvement of parents and caregiver within the growth and development of the child, which does effect the mainstreaming of the child within the family and community.

Donor agencies do specify their own priorities and needs, however don't usually encourage implementing organizations to run programmes to function with a more integrated strategy, the result being fragmented and displaced programmes. On the other hand, implementing organisations are so donor driven, that they rarely build in sustainability strategies for reaching out to their target audience - all affecting the child on ground.

There is a need for large donor agency to dialogue with state government officials, NGO's and beneficiaries while developing their plans and ensuring that the needs of CWSN are met in keeping with the ground realities.



Gaps

The UN Convention on the Rights of the Child, ratified by the Government of India in 1992, states that:

“States Parties shall ensure that:

- a. persons with disabilities are not excluded from the general education system on the basis of disability, and that children with disabilities are not excluded from free and compulsory primary education, or from secondary education, on the basis of disability;
- b. persons with disabilities can access and inclusive, quality and free primary education and second education on an equal basis with others in the communities in which they live;
- c. reasonable accommodation of the individual’s requirements is provided;
- d. persons with disabilities receive the support required with the general education system to facilitate their effective education;
- e. effective individualised support measures are provided in environments that maximize academic and social development, consistent with the goal of full inclusion

How much of this is actually implemented in the context of deaf children?

- The invisibility of deafness results in a huge gap in program interventions – be it at the government, NGO or community level. ‘Visible forms of disability attract much more sympathy, and therefore funding’, says Brinda Crishna, Director of VAANI, Deaf Children’s Foundation. Most young deaf adults do not wear hearing aids when they are out in public spaces. This is because they do not want to be seen as having a form of disability. While at one extreme, deaf children appear like other normal children, at the other extreme, deafness is seen, by many people, as some form of mental retardation as well. Not being able to hear is automatically equated with slow capacity to grasp things and therefore, mental retardation. This is with reference to children/young adults affected by hearing impairment; not deafness in conjunction with cerebral palsy or any other form of disability.
- There is no standard sign language across India. While the Indian Sign Language does exist, an essential requirement is knowledge of English. This makes large parts of rural India ‘disabled’ in some sense. For those who are well versed with the Indian Sign Language, the skill may not come in handy to them all across India, the reason for this being that sign language is not used in a standard form across various parts of India. People have adapted sign language in the local context – which means a child in remote rural Karnataka will communicate (through sign language) in a different manner than a child in remote rural Assam.



- There are several institutional divisions of labour in the education of children with hearing impairment, which contribute to a lack of coherence in delivery systems on the part of key duty bearers. These are applicable to other forms of disability as well, though for the purpose of the present study, they have been looked at with specific reference to deaf children's issues.³
- Resource allocation in regard to deafness as a disability in government programmes like the SSA does obstruct the academic development of deaf children. The inadequate number of specialised teachers and government facilities vis-a-vis the number of deaf children does affect the quality of educational services being provided to children across the state.



³ People with Disabilities in India, From Commitments to Outcomes; World Bank study, November 2007



Recommendations

The Need for Early Identification and Intervention Programmes

There is a need for intensive training of ICDS/ Anganwadi workers / NRHM workers across the state on how deaf children can be identified and on what they can do soon after they identify a deaf child. Skill inputs provided to pregnant and lactating mothers through a series of grass root level workers on basic signs and symptoms of deafness could help in facilitating early identification and intervention for deaf infants.

The Need to develop Information, education and communication material (IEC)

Interactions with most parents have shown that interventions and decision making on their deaf children have been delayed due to lack of proper information on the facilities available within and outside the state. Information, education and communication material (IEC) regarding services for deaf children need to be developed and publicised using various mediums which are user friendly. This would give mileage to deafness vis-a-vis other disabilities. These could be disseminated through various networking fora amongst government, NGOs and beneficiaries.

Documentation of the Child-to-Child approach

There is little documentation of the use of the Child-to-Child approach in CBR programmes, although it is an important part of all the CBR programmes supported in some parts of the world. Child-to-Child has great potential for raising awareness on deaf children's issues, challenging peer attitudes and preparing the ground for the integration of disabled children in schools (Zinkin & Saunders 1990).

Demystifying deaf children's education

There is an urgent need to demystify deaf education in order to encourage the involvement of communities, parents and deaf people themselves. The challenge is to develop an appropriate and sustainable approach to the education of deaf children. This is not possible without the improvement of communication between deaf and hearing people.

CBR workers are in a key position to link deaf children and their families with organisations of deaf adults. Sensitization of members of DPOs is essential for them to understand the importance of including deaf adults as active group members. They can help raise the profile of deafness and dispel some of the misunderstandings surrounding it. Together they could lobby for change in the education of deaf children and the development of sign language and interpreting services.

Parents Involvement at the Community Level

At the community level, there are several measures that can be taken by the parents themselves – to help improve the lives of their deaf children (ILFE toolkit – produced by ILO).



In this extract from the section *the community in the classroom*, the booklet has recommendations on ways in which families can contribute to the school environment:

- Parents can volunteer to assist teachers with classroom activities such as reading or preparing learning materials or helping to organise extra-curricular activities like sports or field trips.
- Parents can be classroom guest speakers to talk about their work and can talk about how education contributed to their experience of work. Parents who do not work could talk about the history of the community, share folk stories or demonstrate traditional skills.
- Parents can become involved in PTA meetings or other school meetings.
- Parents can donate materials to the school or help to find financial contributions to meet school and classroom needs.
- Parents can reach out to other parents whose children are not in school or who are thinking of dropping out.
- They can participate in efforts to keep their children's schools safe and clean
- They can help the school to hold an Open School Day. On that day parents, community members and officials are invited to the school. Representative work from all children is displayed along with new teaching materials.
- Parents and members of the community can help to assess children's learning achievements.
- Successful graduates and dedicated parents can serve as role models, especially those with diverse backgrounds and achievements. Hold a career day every year. Invite these men and women to discuss their careers.

There are just as many suggestions for how deaf children and their parents can use their community as a learning resource and how the school can contribute to the community.

The role of parents

Parents of disabled children often receive little guidance or encouragement. Basic information on deafness and child development would be helpful for many to establish realistic expectations of their child's abilities and limitations. Many parents of deaf children are unaware that their children may be at risk for violence in the school and the community. They need information on how and when their child may be at risk for violence, how they can intervene and how they can best advocate on their child's behalf. In both cases, knowledge and empowerment can be fostered through many avenues, but certainly closer alliances with disability advocacy groups, and deaf parent organisations, is an important place to start.

The role of schools

The schools can play an active role in becoming inclusive environments for hearing impaired children.

- **The presence of teachers and education administrators who are sensitized** to the rights and needs of deaf children in education, and



- are equipped with basic skills and access to resource personnel and materials who can supplement the skills of general teachers
- An effective system for **early identification of children with special needs**, both in terms of medical assessment and in terms of **identifying their special learning needs and potential**
 - **Access to appropriate curriculum and learning materials** which are adapted to their learning needs, both in content and format
 - Sign Language can be included as one of the languages in the School Curriculum so that the hearing peers in school get to know about one more mode of communication better with their deaf peers.
 - **Encouraging a special education system which facilitates inclusive education through greater reliance on the community** (e.g. through CBR), rather than inhibiting it through over-professionalism.
 - **An effective system for monitoring and evaluating** the educational attendance and progress the deaf children, preferably integrated with the general education monitoring and evaluation system.
 - **Attitudes of parents, communities and education service providers and administrators** which promote inclusion of deaf children and promote them realizing their potential
 - **Physical accessibility of schools**, not only the school premises and facilities but also accessibility from the child's home, which brings in issues like transport systems and roads
 - **Provision of financial incentives and aid/appliances support for deaf children** to facilitate their participation in regular schooling
 - **Development of coherent government strategies for promoting inclusive education**, which in particular take greater account of the important roles of NGOs and community organisations

The role of the Community

Civil society must work with families of deaf children and disability advocacy groups in general to take a lead role in advocating change to ensure inclusion of children and adults with deafness throughout society. Through mass media campaigns, collaboration with government officials at all levels, advocacy for progressive legislation and funding that increases the inclusion of deaf children in schools and communities, civil society has the ability to shape and redefine better and more inclusive attitudes towards deaf children.





Conclusion

Although India has a growing disability rights movement and one of the more progressive policy frameworks in the developing world, a lot more needs to be done in implementation and “getting the basics right”. This includes deepening preventive health programs, screening all children at a young age, empowering deaf young adults with employable skills, encouraging the private sector to employ people with deafness, ensuring full integration by overcoming stigma, promoting newer thinking and better coordination of programs, and improving the measurement of hearing impairment to ensure that the scale of this disability in India is better understood. Most importantly, persons with hearing impairment should themselves be made active participants in the development process.

The focus of work in Assam should be on building local resources that are appropriate to the unique needs of the Assamese people. The skills of already existing local professionals in the deaf sector, whether in the Government or working in NGOs, need to be strengthened. Training courses and training materials for all stakeholder groups should be available in the Assamese language. Many more innovative service delivery models need to be developed, be this through the NGO movement or the government, which ensures that services reach children and families in remote areas. Family support groups need to develop to ensure that there is a strong advocacy movement for the rights of the deaf child.





References:

- * Combat Law - Volume 7 Issue 1 The Human Rights Magazine January-February 2008
- * People with Disabilities in India: From Commitments to Outcomes, Human Development Unit, South Asia Region, The World Bank, May 2007 (<http://siteresources.worldbank.org/INDIAEXTN/Resources/295583-1171456325808/DISABILITYREPORTFINALNOV2007.pdf>)
- * Summary report on Violence against disabled children, Norah Ellen Groce, for the World Bank, 2005
- * Ministry of Social Justice and Empowerment outlay for 05-06
- * Punarbhava – National Interactive Portal on Disability
- * Disabled Persons in India; NSS 58th Round; July – December 2002; Ministry of Statistics and Program Implementation, Government of India
- * Rehabilitation Council of India Act
- * The Persons with Disabilities Act 1995
- * UN Enable – Draft Convention on Rights of Persons with Disabilities
- * World Bank Disabilities Report, India – Nov 2007
- * Identifying Disability Issues related to Poverty Reduction – India Country Study for the Asian Development Bank

Asian Development Bank

Chief Commissioner for Persons with Disabilities: www.ccdisabilities.nic.in

Daisy Consortium www.daisy.org

Department of Statistics, Ministry of Planning and Programme Implementation

Disability India Network www.disabilityindia.org

Ministry of Social Justice and Empowerment: www.socialjustice.nic.in

National Institute for the Mentally Handicapped: www.nimhindia.org

National Institute for the Orthopaedically Handicapped www.india-future.com/nioh

National Institute for the Visually Handicapped www.nivh.org

National Trust www.nationaltrust.org.in

Office of the Registrar General, Census of India www.censusindia.net

Rehabilitation Council of India: www.rehabcouncil.nic.in

Rehabilitation International www.rehab-international.org

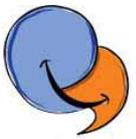
The World Bank www.worldbank.org

United Nations www.un.org

United Nations Children's Fund www.unicef.org

United Nations Economic and Social Commission for Asia and the Pacific www.unescap.org

Country Profile India <http://www.apcdproject.org/countryprofile/india/index.html>



ANNEXURE - 1

Factsheet on Persons with Disabilities⁴ Overview

- Around 10 per cent of the world's population, or 650 million people, live with a disability. They are the world's largest minority.
- This figure is increasing through population growth, medical advances and the ageing process, says the World Health Organisation (WHO).
- In countries with life expectancies over 70 years, individuals spend on average about 8 years, or 11.5 per cent of their life span, living with disabilities.
- Eighty per cent of persons with disabilities live in developing countries, according to the UN Development Programme (UNDP).
- Disability rates are significantly higher among groups with lower educational attainment in the countries of the Organisation for Economic Co-operation and Development (OECD), says the OECD Secretariat. On average, 19 per cent of less educated people have disabilities, compared to 11 per cent among the better educated.
- In most OECD countries, women report higher incidents of disability than men.
- The World Bank estimates that 20 per cent of the world's poorest people have some kind of disability, and tend to be regarded in their own communities as the most disadvantaged.
- Women with disabilities are recognized to be multiply disadvantaged, experiencing exclusion on account of their gender and their disability.
- Women and girls with disabilities are particularly vulnerable to abuse. A small 2004 survey in Orissa, India, found that virtually all of the women and girls with disabilities were beaten at home, 25 per cent of women with intellectual disabilities had been raped and 6 per cent of women with disabilities had been forcibly sterilized.
- According to UNICEF, 30 per cent of street youths have some kind of disability.
- Mortality for children with disabilities may be as high as 80 per cent in countries where under-five mortality as a whole has decreased below 20 per cent, says the United Kingdom's Department for International Development, adding that in some cases it seems as if children are being "weeded out".
- Comparative studies on disability legislation shows that only 45 countries have anti-discrimination and other disability-specific laws.
- In the United Kingdom, 75 per cent of the companies of the FTSE 100 Index on the London Stock Exchange do not meet basic levels of web accessibility, thus missing out on more than \$147 million in revenue.

⁴ UN Enable



Education

- Ninety per cent of children with disabilities in developing countries do not attend school, says UNESCO.
- The global literacy rate for adults with disabilities is as low as 3 per cent, and 1 per cent for women with disabilities, according to a 1998 UNDP study.
- In the OECD countries, students with disabilities in higher education remain under-represented, although their numbers are on the increase, says the OECD.

Employment

- An estimated 386 million of the world's working-age people have some kind of disability, says the International Labour Organisation (ILO). Unemployment among the persons with disabilities is as high as 80 per cent in some countries. Often employers assume that persons with disabilities are unable to work.
- Even though persons with disabilities constitute a significant 5 to 6 per cent of India's population, their employment needs remain unmet, says a study by India's National Centre for Promotion of Employment for Disabled People, in spite of the "People with Disabilities" Act, which reserves for them 3 per cent of government jobs. Of the some 70 million persons with disabilities in India, only about 100,000 have succeeded in obtaining employment in industry.
- A 2004 United States survey found that only 35 per cent of working-age persons with disabilities are in fact working, compared to 78 per cent of those without disabilities. Two-thirds of the unemployed respondents with disabilities said they would like to work but could not find jobs.
- A 2003 study by Rutgers University found that people with physical and mental disabilities continue to be vastly underrepresented in the U.S. workplace. One-third of the employers surveyed said that persons with disabilities cannot effectively perform the required job tasks. The second most common reason given for not hiring persons with disabilities was the fear of costly special facilities.
- A U.S. survey of employers conducted in 2003 found that the cost of accommodations was only \$500 or less; 73 per cent of employers reported that their employees did not require special facilities at all.
- Companies report that employees with disabilities have better retention rates, reducing the high cost of turnover, says a 2002 U.S. study. Other American surveys reveal that after one year of employment, the retention rate of persons with disabilities is 85 per cent.
- Thousands of persons with disabilities have been successful as small business owners, according to the U.S. Department of Labor. The 1990 national census revealed that persons with disabilities have a higher rate of self-employment and small business experience (12.2 per cent) than persons without disabilities (7.8 per cent).



Violence

- For every child killed in warfare, three are injured and acquire a permanent form of disability.
- In some countries, up to a quarter of disabilities result from injuries and violence, says WHO.
- Persons with disabilities are more likely to be victims of violence or rape, according to a 2004 British study, and less likely to obtain police intervention, legal protection or preventive care.
- Research indicates that violence against children with disabilities occurs at annual rates at least 1.7 times greater than for their peers without disabilities



ANNEXURE 2

District Wise Health Infrastructure in Assam

Sl. No	Name of the District	SDCH	BPHC	CHC	MPHC	SHC	SD	SC
1	Barpeta	1	7	6	20	2	7	264
3	Baksa	0	6	5	18	3	13	159
2	Bongaigaon	0	4	3	16	0	7	58
4	Cachar	0	8	1	14	3	2	269
5	Chirang	0	2	2	5	3	11	76
6	Darrang	0	4	3	14	2	5	163
7	Dhemaji	0	5	3	12	1	1	98
8	Dhubri	1	7	5	8	5	14	246
9	Dibrugarh	0	6	5	10	0	10	240
10	Goalpara	0	5	1	14	3	11	151
11	Golaghat	1	5	5	25	2	6	144
12	Hailakandi	0	4	1	5	1	2	105
13	Jorhat	2	7	5	19	1	12	142
14	Kamrup (M)	0	1	1	8	0	12	281
15	Kamrup (R)	1	12	9	19	0	23	52
17	Karimganj	0	5	1	7	3	7	217
16	Karbi Anglong	1	8	5	23	7	8	103
18	Kokrajhar	1	4	2	17	4	17	163
19	Lakhimpur	1	6	5	11	3	6	156
20	Morigaon	0	3	2	3	6	14	125
21	Nagaon	0	11	9	23	4	20	368
22	Nalbari	0	4	6	27	4	5	121
23	NC Hills	0	3	2	2	3	2	65
24	Sivasagar	2	8	2	19	5	1	222
25	Sonitpur	2	7	4	22	6	12	281
26	Tinsukia	0	4	4	10	0	5	164
27	Udalguri	0	3	3	10	1	9	142
	Total	13	149	108	381	72	242	4592



ANNEXURE 3

Some NGOs working in the field of disabilities in Assam

1	ASCENT , located at Mangaldai, Darrang District of Assam for pre-school, early intervention and training for MR and CP children
2	Disabled Persons Welfare and Rehabilitation Trust, a VTC for disabled in Kharupetia in the Darrang District of Assam
3	ASHADEEP , a day-care centre for the MH and for their rehabilitation at Saru Motoria, Dispur in Guwahati
4	Guwahati Mental Welfare Society a rehabilitation centre for the mentally challenged people at Kahilipara in Guwahati
5	Prerona Spastics Society a special school at Jorhat for the Children with MR & CP
6	Bikalanga Kalyan Kendra, " Telahi" , a VTC at Panigaon in Lakhimpur
7	Gram Vikas Kendra a VTC at Kathiatoli in Nagaon ,
8	Global Health and Education Centre a VTC at Rupahi Bhaktagaon in Nagaon
9	Mrinaljyoti Centre for Rehabilitaion of children with CP at Duliajan
10	Dristidan Mental Organization for Welfare of Visually Handicapped people of NE Kamrup
11	Durpang Pichala Anchalik Bikalanga Anusthan, Balipur, Lakhimpur
12	Amar Pragati Sanskritic Chora and Samaj Unnayan Kendra, DakshinRukmini Nagar, Betola, Ghy 28
13	Janakalyan Tatha Bikalanga Lokar Sevaaru Govensana Kendra, Dubia, Sonitpur
14	Atma Nisbhar Ex Challenge. P O _ Gopinath Nagar, Ghy- 16
15	District Physically Handicapped Welfare Association, Goimari, PO Tokrapara, dist – Kamrup
16	Guwahati Mental Welfare Society, Vikash Nagar, DakhinGaon, Kahilipara, Guwahati-19
17	Rehabilitation and Training of persons with Multiple Disabilities in Rural areas, Opp Silpukhuri, GHY-3
18	Upper Assam Handicapped Centre, Ward no 2 Bokakhat, Dist Golaghat
19	Sri SriSeva Ashram Silapathar, Dist – Demaji, Barpatahr, PO Maduripatahr
20	Mrinaljyoti Rehabilitation Centre, Zaloni, Dibrugarh
21	Aids for the Disabled Society, Morigaon

Source - Directorate of Social Welfare, Assam