For Teachers and Parents
Know More About Differently Abled

(These are all true life stories. The names have not been changed.)

"This is the story of a disabled girl named Ritu Dhawan who studied in a Government school of the Delhi Administration. She was affected with polio, her lower limbs were lifeless and she was not able to stand; she could only crawl. Her father would bring her to school in a wheel chair. While going back from school, her younger sister, who was incidentally in the same class, used to help her. One day, I saw her sitting all alone in the class while her classmates were playing outside. She was trying to raise herself with her hands to peep through the window but she couldn’t manage that. I was perturbed and approached my principal and got permission to take the girl to the playground with her sister’s help. She was overjoyed to come out to the playground. She was not able to stand and walk but she was cheering, smiling and laughing. Seeing her joy and smile, the other students of her class were motivated to push her in her wheel chair wherever they went for their different activities. I introduced her to the joys of reading books which changed her life. She did her studies till post graduation. Now her father is no more but her sister helped her to go to college. To finance her education, she took tuitions along with her own studies. She learnt to do knitting, stitching, embroidery, cooking (with help). Today, she is teaching in a school as well as managing things at home.

I look back to the day when she was a helpless girl dependent on others and today she is a recipient of the BEST Teacher award, to me she is strength personified. Do we still call her disabled or one differently abled?

(As narrated by a teacher of Government School in Directorate of Education).

DO YOU KNOW?

Do you know Bhagwat Subramanya Chandrasekhar remains India’s biggest match winner overseas with 42 wickets in five Cricket Test Matches? An attack of polio in childhood left his right arm withered, but Chandra turned his handicap into an advantage.

We can do many things
A PEEK INTO A PARENT’S WORLD

One may say that for parents of challenged children it is not an easy life. No one denies that but various challenges/hurdles can be overcome. Let’s read the experiences of such a parent as she shares her story.

"I am the parent of a child who has reading and writing disabilities. He is called a Dyslexic. I am also a school teacher in a government school in the Directorate of Education. As a parent with my dyslexic child I had a long journey full of challenges. My son had to undergo testing for his disability at every level of his education - primary, middle, secondary, senior secondary and college as required by the school and university authorities. Certificates from government hospital were needed to exempt him from Sanskrit (third language) at middle level, Hindi at secondary level, to avail the facility of extra time and scribe at secondary and senior secondary level, to appear for his CBSE exams. A certificate from a Government Hospital was also required by the university and the college authorities to get him admitted in a college in Hotel Management course in 3% reserved disability quota.

Believe me, as a parent it was not an easy journey for us. We used to visit the school every time to ask for all the facilities for which he was entitled. Also in every class we had to orient and make the class teacher aware about dyslexic conditions and seek their help in resolving my son’s various behavioral and emotional problems. To prepare the child to use the facility of scribe was a difficult task as he was not ready to accept the fact that someone else (not his Parents) would write his exam and he had to tell all the answers to that person. To maintain our faith in his abilities we did have to make consistent efforts and to overcome our emotional trauma we did meditation regularly

Hopefully he will be successful in his life".
(As narrated by Mrs. C Kanta - Parent of a dyslexic child and a teacher.)

ACCEPTANCE MAKES A DIFFERENCE

Yet another officer of the Directorate of Education, Mrs. Kapoor, shared her heart warming experiences of bringing up her hearing impaired daughter who at present is a lecturer in a college in Delhi University. She says it was not easy. Parents of such children go through various stages like denial, anger, bargaining, depression, finally acceptance - it may take years. But in this case parents were realistic enough to accept her for who she was, and resolved to start working with her. She was put on hearing aids in both the ears and was admitted to a normal school. Parents worked hard to help improve her speech and vocabulary. Her teachers were very supportive. In her case another support was a large joint family where she grew up playing, learning with her siblings and cousins. Acceptance by parents is very important; a
child who is loved and respected by parents is accepted by family and society and up bringing of such a child become easier.

Surely going through these real life experiences gives a different perspective to the struggles of children with disability and their parents which is quite different from the one which teachers normally have.

**IS THERE ANY CHOICE FOR THEM?**

What happens when you see a child who is not normal according to the standards set by the society? We probably start sympathizing with his/her parents or have pity on the child. This happens with most of us as human beings. How do we view such children in our class rooms - a burden, a problem or an individual who needs a different teaching methodology to deal with? Maybe at times we want to really help the child but feel ill equipped to handle or provide the special help to the child for the kind of disability he/she might be having.

**A SPECIAL OR A NORMAL SCHOOL?**

We also have this notion that such children must be sent to special schools only and not in schools where ‘normal’ children study. The reasons cited for sending them to special schools could be that in special schools they will be given specialized care and attention by people especially trained for them and special equipment, material is available for making their learning effective. Also since they have similar peer group here, they don’t develop any complexes which may not be so when they attend the schools for ‘normal’ children.

**But where are these special schools?**

For a developing country like India, to have a large number of special schools may not be feasible because of the cost factor. Also the availability of trained personnel (say, special educators) is a big question mark. Apart from the availability factor, the degree of severity and the kind of disability of the child, the parent's attitude also play an important role in deciding whether this child goes to a special school or a so called 'normal' school. Thus, inclusion in the nearby normal school seems to be a viable option.

**CAUSES OF DISABILITIES**

One may be wondering as to why disabilities occur. There is no particular group in society which only has disabilities. Anyone can become disabled or handicapped. Causes of disabilities may be grouped as:-

**PREVENTION**

Timely interventions like immunization of children on time, good nutritious diet of the mother and the child, genetic counseling, not having marriages among close relatives, matching of RH factor of 'would be' parents rather than just the horoscopes will prove helpful in reducing the incidents of disabilities.
(a) Prenatal causes (before the birth of the child).
(b) Peri-natal (during the process of birth).
(c) Post natal (after the birth of the child).

Among other things, prenatal causes include Rubella (German measles), RH incompatibility, health of the mother, radiations from X rays etc. Head damage leading to brain damage during the childbirth may prove lethal. Infections (Polio, meningitis), accidents may be the factors leading to disabilities in the post natal category. In fact to have a normal, healthy child is actually a gift and the idea of the society having any gender bias seems not only ridiculous but redundant as well.

**PROCESS OF CHANGE IN ATTITUDES**

Disabilities have always existed in our society, only the attitude of society towards disabled has undergone change over time.

**Segregation**

At the first stage most societies denied the disabled the right to live. The second stage was influenced by religion and compassion there of. Although asylums were developed to feed and care for the disabled, their talents and capacity were not used.

The advent of printing technology had a profound influence on development of educational programmes for persons with disabilities.

*Huary* established the first school for the blind in the world, in **Paris in 1784**. Thus it was mainly a policy of ‘segregation’ (an example of this was portrayed in the movie ‘BLACK’).

**Mainstreaming**

After complete segregation, mainstreaming of these children started with sometimes having special wings in general mainstream schools or having certain special classes or at times having resource rooms in the general mainstream schools.

**Integration and Inclusion**

Then came the concept of integration (as in Integrated Education for Disabled Children, IEDC). Latest in the evolution process is the concept of Inclusion as envisaged in Sarv Shiksha Abhiyan.

**HELPING FACTORS**

Two major factors helped to bring a slow attitudinal change in the mind set of the people in India. These were:

1. **Placement of children with disabilities in regular schools**
2. **The establishment of special employment exchanges** to provide employment to disabled persons by the Government of India.

**Are Integration & inclusion same?**

In integration the students with disabilities are placed in regular schools and have to adapt to its environment.

In inclusion the onus is on the school to make the school environment least restrictive and not conducive for learning for these children.
Thus the welfare and charity approach has given way to recognition of the Human Rights of persons with disabilities. It is recognized that talents of children with disabilities need to be optimally developed for the benefit of the whole society. For long time, we have been calling them handicapped or disabled children. If rightly guided and developed it can be seen that they have amazing abilities which must be recognized and nurtured, thus realizing that they are differently abled.

**How can a teacher help the differently abled?**

The teacher plays an important part not only in screening and identification of such children in class rooms but also in using a variety of tasks as well as teaching strategies. This variety needs careful planning. For example

As a teacher working with students with hearing challenges one can use the following tips.

- Face students when speaking.
- Slow down your rate of speaking.
- Use short, one-concept statements.
- Present information on the chalkboard or through written handouts whenever possible.
- Encourage students to visualize material that has been orally presented.
- Provide students the opportunity to touch and interact with materials that relate to ideas being presented.

Similarly while working with students with visual problems a teacher can keep the following in mind:-

- Keep visual information simple and uncluttered.
- Leave extra space between words, sentences and lines when writing on the board or when preparing worksheets.
- Encourage students to ask for clarification of visual information.
- Encourage students to discuss ideas with other students.
- Encourage students to talk to themselves when trying to learn and remember information.
- Encourage students to talk through steps while solving problems.
- Have students outline papers verbally before writing.
- Teach reading through a phonics approach.

For intellectually impaired students certain helpful tips for the teacher may include these:-

- Never underestimate these student's abilities.
- Give lots of praise.
- Provide prompt feedback.
- Divide tasks into small meaningful steps and present them to the student sequentially.
- Put safety first. Remind students of the safety rules and make sure non-disabled students are careful around their disabled peers.
• Minimize verbal instruction and emphasize concrete learning experiences.
  Keep instructions as simple as possible.
• Limit distractions as much as possible.

It is common knowledge that **Learning disorders** constitute the major cause for academic under achievement in young children. Learning disorders are not recognized easily. They are not manifested at the physical level. Many a times, parents and teachers fail to recognize a child with learning disability (as clearly shown in the movie ‘Taare Zameen Par’). There could be children in schools who look like any other child but have problems with learning which need to be identified by teachers. Instead of rebuking or punishing these children, they must be understood and guided accordingly. Teachers have to be vigil and compassionate while dealing with such children.

Certain strategies have been effective with some students who have **learning disabilities** some of these are:

- Capitalize on the student's strengths.
- Provide high structure and clear expectations( stick to the instructions provided once).
- Use short sentences and simple vocabulary.
- Provide opportunities for success in a supportive atmosphere to help build self-esteem.
- Allow for flexibility in classroom procedures(some oral answer/test instead of all of them in written form).

The teacher may help **physically impaired and cerebral palsied** (CP) by trying to reserve an accessible place for the student to sit. To include children with disabilities in physical activities a teacher can introduce modification in physical activities too like using lighter softer balls, changing rules of the games in terms of distance/space etc.

**Classroom Management**

If a student has limited note-taking capacities, teacher can arrange some one else in the class to take notes for her, for this carbon notebooks are a big help. Also giving the child a sloped edge to write on can be useful to a student with upper body extremity difficulty. Aids like thicker pencil/pen, may be provided for children with restricted fine-motor function in order to help in writing. Controlling the noise level in the classroom is also very important. For students who have hearing aids, noise must be kept to a minimum. Adaptive technology such as computers with voice production software proves very useful.

**Behaviour Management**

Many children with disabilities sometimes become aggressive and **misbehave with their peers**. Teacher maintains the balance and discipline the class suitably. A differently abled child except for his/her some specific needs is like any other child and should be treated and disciplined like other children. Special student’s characteristics should be considered while forming class rules/norm for example if a child with

**Wanted more peers/supporters!**

A student of class XI of New Friends Colony Govt. School who was confined to his wheel chair was taken on a school tour from Delhi to Kanyakumari( !! ) with the support and help of his peers only.
cerebral palsied has a tremor and knocks down something unintentionally it should not be considered as a mischief/misbehavior.

**What can peers do?**

The teacher role is important for facilitating a healthy social environment and positive interactions in the class. Peer support group or buddy system can be started with the help of teachers. In this, peers of the challenged child are assigned different duties depending on the needs of this child. Like a CP child studying in class 9th in a Government school in R.K. Puram area is totally confined to wheel chair. He is too shy to ask anyone for help to visit the toilet. Here the teacher initiated the interaction between him and his classmates and encouraged two students to take up the duty of taking this child to the toilet by regularly asking him for his need.

These simple steps taken by the teacher will have a positive effect on the learning experiences of these children.

Thus coupled with changed, modified skills, methods of teaching, a teacher has to be good manager of the classroom arrangements too so that children with special needs can benefit to the maximum extent.

**Teacher as a therapist and counselor**

Beyond this the teacher plays the role of therapist as well a counselor not only for the special children but for their parents too. Partnership with parents of such children is crucial to maximize success for students with disabilities as learners.

Just practicing simple counseling skills and looking at strengths of these children can work wonders for this partnership. Honest, positive communications, some genuine complements, understanding the parent's perspective and their unique family unit and including parents in various activities of the school all help to build a trusting relationship between the teachers the parents.

**Barriers** come when parents dread the complaints of the teachers and teachers think they are being overburdened with the extra ‘work’ of these children. A little effort on the part of the teacher can help to over come these.
An Aware Teacher
Becoming more aware of the latest development in the field of disability, various policies of the government and communicating them to the parents will only strengthen the bond between them.

Teacher as a ‘Link’/Facilitator
Sharing success stories of other parents, encouraging them to reach out to parents of other children with disabilities - to build their own support system, to celebrate together their achievements and goodness of life not just always focusing on disabilities, sharing and learning from each other's experiences, helping parents (through examples) to overcome their social embarrassments, inferiority complexes and hiding of the fact that they have a child with disability. In other words extending support to strengthen their 'acceptance of the child'.

In this context let's take the case of Dr. Shanti Auluck, who has a challenged son in his thirties. Her struggle gives valuable lessons to everyone. After resolving her own conflicts and fears she decided to share experiences with other such parents. She reached out, sought support built a network and become the founder member of ‘Muskaan’ - a parents association for the welfare of children with mental handicaps.

What seems to work?
Almost all the success stories have some integral features like acceptance of their child with disabilities, early interventions, planned, systematic and consistent efforts with love, firmness, patience and perseverance, building a solid support system, reaching out to network with other parents and other service providers in disability sector and developing and maintaining a positive outlook in their lives.

What works?

TEACHER - AN AGENT OF CHANGE.

Many physical and attitudinal barriers exist for the disabled and these negative attitudes are the most formidable ones who can be a better person than a teacher to help others overcome these by becoming a role-model of a believer that 'disability' does not mean no 'ability' but only 'different ability'?

A teacher can be an 'agent of change' in the mindset of pupils and community at large. To achieve this, the teacher will have to learn some new skills of teaching to work more on class room management for more effective learning to take place. To inspire others the teacher has to be not only a believer but a practitioner of a 'positive attitude' towards children with special needs. Some of the steps taken by him could include the following.
• Persuade these children to regularly participate in co-curricular activities.
• Give themes like ‘I can do it’ etc. for poster making competition/essay writing etc.
• Be proactive in convincing other teachers/management to make structural modifications for barrier free moment for these children.
• Get disability friendly components included in BalA.
• Spread information about the YUVA Helpline of Directorate of Education. These services are very much available for differently abled too.
• Introduce students to various special schools/ NGOs/Service Providers working in this field.
• For community awareness, may, call some resource person from disability sector for interaction on days of meeting of PTAs.
• Persuade VKS (Vidyalaya Kalyan Samiti) to have stronger linkages with resident welfare association to spread awareness about assessment/welfare camps being organization for these children.
• May organise ‘NUKKAD NATAK’ (Street Play) with themes relating to differently abled.
• Celebrate 3rd December as ‘ability day’.

The list is endless.

A teacher can light the fire of the attitudinal changes in all her pupils.

Remember ‘Tare Zameen par’? One teacher with his understanding and efforts made changes in the outlook of the management, teachers as well as students towards children with special needs. Each positive stroke is important. It is time yet for another story!

I can make a difference.

Once a person was walking on the beach and he saw another person at a distance, picking up something and throwing it back to the ocean. Curious, this person started walking towards the other one to see what he was throwing back to the ocean. He also observed that the ocean waves were bringing starfish by the hundreds to the shore and leaving them behind to die. By the time he reached the person he realized that he was picking up starfish (left behind by the waves) and throwing them back to the water. He asked this person why he was wasting his time, as throwing a fish back would not make any difference since there were so many.

The other person didn’t say anything, threw another fish back which had just been left by the waves and then he said, “It made a difference to this one”.

Each positive contribution is significant in the overall process of change. And the teacher is the most crucial agent of change.
Annexure 1

Let us understand some commonly used terminologies about differently abled children.

**Impairment** is any loss or abnormality in structure or function, psychological, physiological or anatomical. (This is at the level of the organ)

**Disability** is any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being. (This it is at the functional level where range of activities may be affected).

**Handicap** is a disadvantage for a given individual resulting from impairment or a disability that limits or prevents the fulfillment of a role that is normal for that individual. (This focuses on social disadvantages because of unfulfillment of the role.)
Thus impairment may result in disability and that in turn may lead to handicap.
Fact Sheet

Think of Me First As a Person

This poem depicts the feelings of a special child in regard to his birth, his interaction with siblings and other people. It brings out beautifully how a special child has the same emotional needs as any other child - the need for affection, security, achievement. It sums up the truth that such a child can learn, but he needs to learn at his own speed.

I feel cozy drinking coca in the kitchen when a snowstorm blusters outside.
Though it is comfortable to be babied,
I am less dependent when people treat me as a big boy.
I don’t want their sympathy,
I want their respect for what I can do.
I am slow and many things you take for granted are hard for me.
If I can learn at my own pace and still be accepted, I can fit into a world where slowness is suspect.
Think of me first as a person,
Who hurts and loves and feels joy.
And know I am a child to encourage and direct.

SMILE AND SAY HELLO -
EVEN THAT IS ENOUGH

Source: MUSKAAN

In the journey of the evolutionary process of changing attitudes towards disability some landmark decisions include:

A) **Persons with Disabilities** (Equal opportunities, protection of rights and full participation) **Act which was passed by parliament in December 1995.** Certain features of the Act include the fact that **seven** disabilities have been defined. Access to education to all children with disabilities **upto 18 years** of age has been assured. Every educational institution receiving aid from the govt. shall reserve **3% seats** for admission to students with disabilities. Every special institution established for education or rehabilitation of the disabled must be licensed by the state government. Grievance redressal machinery has been set up at the centre and in states. At the central level the Chief Commissioner for disabilities having power of civil court discharges this duty.
This office of the Chief Commissioner for persons with disabilities is situated at Sarojini House, 6, Bhagwan Das Road, New Delhi -110001.

B) India has set up a statutory mechanism for standardizing and monitoring training of 16 different categories of professionals considered essential for the proper education and rehabilitation of persons with disabilities, through the Rehabilitation Council of India (RCI). This is housed at B-22, Qutab institutional Area, New Delhi -110016.

C) Our country is also one of the few developing countries to have enacted a law for the care of persons with Mental Retardation, Cerebral Palsy, Autism and Multiple Disabilities through the National Trust Act, 1999.

It must be mentioned here that children with learning disorders are still to be included in the above said legislation.
Challenges of autism

Over 4 million are living with autism in India. Yet, the disorder has hardly got research attention, funding or efforts to create public awareness. At a recent conference, experts & families spoke about their disillusionment.

A DEVELOPING DISORDER

WHAT IS AUTISM

Autism is a lifelong developmental disorder characterized by impairment in social skills, language, communication skills, and repetitive and restrictive behavior.

Typically, autism appears in the first three years of life and is difficult to identify.

Degree of autism disorders vary among people. Hence, it is important to consult an Autism Spectrum Disorder (ASD) expert, in some, the disorder is invisible or even absent.

Current research links autism to biological or environmental differences in the brain, but simple cases of ASD is known.

There is no cure for ASD currently.

The effective treatment for Autism is through a multidisciplinary community that is supervised by expert.

There are treatments that can help those who have ASD.

A谟sberg’s SYNDROME

Asperger’s Syndrome is a milder variant of autism spectrum. Those affected are characterized by social isolated and repetitive behavior. They are often observed with topics such as anatomy, weather, history, cars etc. They do not talk as much but they are in the above normal range in verbal ability and below normal in performance abilities.

IT’S NOT A CASE OF MENTAL RETARDATION

A person is not mentally retarded, not slow-witted, not feeble-minded, not a child of low intelligence if he is in the normal range of intellect and shows normal development.

The incidence of autism and growing at a steep rate. Current studies estimate that 1 child in every 2500 newborns has ASD.

Aamir film sensitises schools

Many parents simply don’t know what to make of their child’s "odd" behavior. Experts say understanding is key to produce good results in such kids.

Aamir Khan’s latest directorial venture, Paani, which has been directed by his wife Kiran Rao, has made him the talk of the town. The film, which is based on the socio-economic issues of the country, has taken a unique approach to the film and has been praised for its sensitivity and realism.

The film, which is set in a rural village, tells the story of a young boy named Paani who is born with an unusual ability to see the future. The film explores the challenges faced by the boy as he tries to understand his abilities and the consequences of using them.

The film has been praised for its realistic depiction of rural life and for its powerful message on the importance of understanding and empathy.

YUVA Help Line No. 1800116888
D) CBSE has provided some relaxations for disabled children.

CBSE RELAXATION FOR DISABLED CHILDREN

The facilities extended by the Board to the disabled candidates (Dyslexic, Blind, Spastic and Candidate with Visual Impairment) are as under:

The persons with disabilities (Dyslexic, Blind, Spastic and Candidate with Visual Impairment) have the option of studying one compulsory language as against two. The language opted by them should be in consonance with the overall spirit of the Three Language Formula prescribed by the Board. Besides one language they can offer any four of the following subjects: Mathematics, Science and Technology, Social Science, Another Language, Music, Painting, Home Science and Introductory Information Technology.

(a) From the 2002 Examination, alternate questions in lieu of questions requiring special skills based on visual inputs have been provided in Mathematics and Science for Sec. School Examination (Class X).

(b) Blind, Physically Handicapped and Dyslexic Students are permitted to use an amanuensis. The amanuensis must be a student of a class lower than the one for which the candidate is taking the examination.

(c) The visually handicapped students appearing from Delhi were provided Questions Papers with enlarged print for 2003 Examination.

(d) Disabled candidates are allowed additional one hour (60 minutes) for each paper of external examination.

(e) Board does not give relaxation in minimum marks prescribed by it.

(f) Exemption from Examination in the Third Language.

(g) The Board considers the Physiotherapeutic exercises as equivalent to Physical and Health Education course of the Board.

(h) Centre Superintendents have been instructed to make arrangements for the conduct of the examination of such candidates on the Ground Floor as far as possible.

(i) Physically challenged children will specifically indicate their category and also state whether they have been provided with a Writer in the columns provided in the Main Answer Book.

(j) Answer books of such candidates are evaluated by the Regional Officers at one Nodal Centre.

(k) The Centre Superintendents have been requested to send the Answer books of such candidates in the separate envelope to the Regional Officer concerned.

(l) Separate question papers in Science & Mathematics at Secondary (Class X) level have been provided for blind students w.e.f. 2003 Examinations.

(m) Assistant Superintendents for the blinds are teachers from the schools where the blinds are studying. As far as possible, teachers of the same subject are not allowed to be appointed on the day of examination. One invigilator is from outside the school.

(n) Assistant Superintendents supervising the physically challenged children who have been granted 60 minutes extra time are paid remuneration @ Rs. 50/- + Rs. 20/-

(o) Amanuensis are paid @ Rs. 100/- per day/paper daily by the Centre Superintendent from the centre charges amount.
New Delhi: Months after Taare Zameen Par captured the imagination of the country for its sensitive portrayal of a dyslexic child, life remains pretty much the same for most differently abled children. Getting admission is as tough as ever in most mainstream schools. Those lucky enough to get in, meanwhile, struggle to be considered ‘normal.’ Like Shwetabh Nagar, there are many children in the city for whom every day is a battle.

Experts point out that sensitisation towards the needs of special children is essential. Says Aruna Broota, a professor in the psychology department of DU, “Such children face a tremendous amount of rejection from the world around them. As a result, they develop a hostility towards others as well as a negative concept of the self. Most experience a sense of isolation.”

Broota cites the example of a girl with a writing disability. “Despite her disability, the school refused to give her a writer for the exams, even though it’s a government rule. Most schools are not even aware of the different kinds of learning disabilities that get swept under the blanket term of dyslexia. Sensitisation is very necessary,” she adds.

The struggle starts early. Parents claim that getting admission is an uphill task, with most schools refusing to take in students who may negatively impact the class results. Says the parent of a six-year-old, “My child has a learning disability and getting admission has been extremely difficult. Most schools don’t have the facilities for such students. Others that have facilities want to put them in a separate classroom. Why segregate them like this?”

Usha Ram, principal, Laxman Public School, admits that inclusive education is still a distant dream in the city. “Awareness is the need of the hour. Most schools don’t even have special educators, which is a necessity.” Ram says. “In our school, students with learning disabilities have been put in mainstream classes, except in the case of some subjects.” This, she says, has been possible because of special educators who cater to their needs. “Once the government makes it mandatory for schools to have special educators, differently abled children can be accommodated anywhere,” Ram adds.

Integrating differently abled children into the mainstream is also a major problem. Rachna (name changed) has a child who is dyslexic, in a primary class of an elite school in Delhi. She claims that her child has shown marked improvement and she now wants her to be included with other mainstream students. “The school refuses to do so. They’ve turned my child into a poster student for their differently abled class instead,” rues the parent. “The school claims it doesn’t have the resources and doesn’t want to take the risk of my daughter relapsing and failing in a normal class.”

Even in schools which have a provision for special educators, there is the perennial problem of trained manpower. “The ratio of teacher to student has to be strictly followed if you want to impart quality education to children with special needs,” says Ram. “This is one reason why schools which offer inclusive education often charge exorbitant fees. The government needs to step in and take some concrete measures.”
Individuals with Autism may show the following traits in varying combinations:

- Not wanting to be cuddled
- Little or no eye contact
- Inappropriate laughter or crying without any appropriate reason
- Difficulty in interacting with others - prefers to be alone
- Inappropriate attachment to objects
- Inappropriate or no response to sound or other speaking (as if hard of hearing)
- Repetitive movements - spinning of objects or self/hand flapping/rocking
- Difficulty in speaking - may use gestures/repeat what others say

No real fear of danger

Apparent insensitivity to pain

(MHRD Publication)
A Step Towards Inclusion by Directorate of Education, Delhi:

Integrated Education for disabled children (IEDC), a centrally sponsored scheme of the ministry of HRD is being implemented by the Directorate of Education, Govt. of NCT of Delhi. To start with this scheme was introduced in the 1970s in the selected senior Secondary Schools of Delhi, but now all the Schools under Directorate of Education, Delhi are covered under the scheme. Five categories of disabled children are being covered in this scheme. These are Orthopaedically Handicapped (OH), Mentally Retarded (MR), Visually Impaired (VI), Hearing Impaired (HI), Cerebral Palsied (CP).

Children with exclusive speech problems with learning disabilities, severally MR are not included in the scheme.

Certain benefits are extended to children registered under IEDC schemes. These include books and stationary allowance, uniform allowance, transport allowance, escort allowance, reader allowance, actual cost of the equipment used.

Children with the certificates of disability of 40% or more are registered under the scheme. Now this registration is done at the level of each school and required information is submitted in the prescribed proformas to the respective District Coordinators of this scheme. There is a Deputy Director of IEDC Scheme. Office of the DDE (IEDC) is situated in the building of GBSSS at Begumpur, (MMTC colony), New Delhi.

There are eleven District Coordinators (IEDC), one placed at each district. Further each government school has a designated teacher incharge (IEDC). To get medical certificates for children with special needs, some government hospitals are specifically given the responsibility. These are:

**Territorial Jurisdiction of ‘Hospital for conducting Medical Examination’**

<table>
<thead>
<tr>
<th>S.NO.</th>
<th>Name of Hospital</th>
<th>Jurisdiction for issue of certificate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Lok Nayak Hospital</td>
<td>New Delhi, Central, South Distt.</td>
</tr>
<tr>
<td>2.</td>
<td>Aruna Asaf Ali Govt. Hospital</td>
<td>Central Distt, North Distt,</td>
</tr>
<tr>
<td>3.</td>
<td>Deen Dayal Upadhayay Hospital (Hari Nagar)</td>
<td>South-West, West Distt.</td>
</tr>
<tr>
<td>5.</td>
<td>Sanjay Gandhi Memorial Hospital</td>
<td>North-West Distt.</td>
</tr>
<tr>
<td>7.</td>
<td>Lal Bahadur Shastri Hospital</td>
<td>East Distt.</td>
</tr>
<tr>
<td>8.</td>
<td>Babu Jagjivan Ram Memorial Hospital</td>
<td>North-West Distt.</td>
</tr>
<tr>
<td>9.</td>
<td>Rao Tula Ram Hospital (Jafarpur)</td>
<td>South-West Distt.</td>
</tr>
<tr>
<td><strong>Other Hospitals</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Hindu Rao Hospital (Malka Ganj)</td>
<td>North Delhi.</td>
</tr>
</tbody>
</table>
Every year district coordinators (IEDC) undertake orientation of teacher incharge (IEDC) in inclusive education and its various aspects including the ones concerned with the policies of the Directorate of Education. Certain projects like buddy system –peer support group are also being undertaken at district level.

For implementation of IEDC scheme in Delhi, 2 Non Governmental Organizations (NGOs), are also involved. To give an impetus to barrier free environment in the schools, the Directorate has given specific instructions to HOS of all schools to make certain structural changes in schools like building ramps with hand rails, modified toilets (western toilets) and wide doors to facilitate movement of wheelchairs.

Since the year 2006, inclusive education aspect of Sarv Shiksha Abhiyan is also being implemented by the Office of DDE (IEDC). Under this, during 2006-07, each educational district had at least 2 Assessment Camps for children with...
special needs where children identified at school level were assessed by a team of medical experts. After the assessment camps, a **Distribution Camp** was held at each district to distribute the required aids, appliances including wheel chairs, calipers, artificial limbs, crutches and spectacles.

Directorate of Education is also committed to supplying Braille text books to all the visually impaired (Blind) students studying in all the schools.

All over the world 3rd December is celebrated as ‘World Disabled Day’. In schools also this is observed with highlighting the abilities of children with disabilities. Schools are also encouraged to include children with disabilities in their other co-curricular activities like sports, cultural activities etc. **Indira Awards** for children with disabilities were introduced by the Directorate of Education in 2007.

**Career Melas** at district level gave due importance to the career opportunities available for children with special needs. A special corner/enclosure was earmarked for them. Heartwarming stories of even intellectually challenged getting employment in ice cream parlors, physically challenged being employed in call centres only are encouraging signs in the area of career opportunities for these persons. At present, it is estimated that 4 to 5% of Indian population may be having one disability or the other. Thus, training such people to be independent economically also is a human resource development activity and not a charitable one. Above all Right to Education (6 to 14 years of age) is a fundamental right, thus children with disabilities can’t be denied this. Moreover while interacting with these children other so called ‘normal persons’ also get a different perspective towards life and they too enrich their self concept.
MANGESH, APARNA, Nikita, Mahesh and Nasir are all call centre operators — with a difference. They are blind. Welcome to India’s only call centre manned exclusively by the visually impaired, in Mumbai’s Worli Sea Face. Started in June last year with six operators, the number of employees has more than tripled — and is 20 now. They take 100 calls a day, transcribe medical data, screen resumes and even organise interviews.

Reena Chaddha, project manager, Tata Indicom, which runs the centre at the National Association of Blinds (NAB), says similar centres will be set up in Ahmedabad and Delhi soon. Suhas Karnik, in charge of NAB’s employment cell, explains how the call centre operates: “A software reads out everything on a computer screen aided by specially designed voice-based commands used in the call centres, compatible with mobiles. These enhance the capabilities of the visually challenged,” he says.

Take Mangesh Indulkar; 27, who does not mind travelling 60 km a day between Kalwa and Worli. “This is the best thing that has happened to me,” he says. “Other sectors have discouraged people like us. Now I can have a Mc Burger whenever I want,” adds the self-confessed fast food fan.
Enabling the disabled

Chennai: For the last three years, Jayashree Raveendran, a hearing-impaired woman who had a hugely successful career, has been helping qualified disabled people find suitable jobs. According to her, on the one hand, there are companies ready to give equal opportunities to the disabled but unable to find the right candidates. And on the other, there are qualified disabled persons hamstrung by lack of awareness, over-protective families and fear of rejection.

So, she bridges the gap by hosting ‘Employability’—a job fair that brings together companies and employable disabled candidates. Raveendran, founder of Ability Foundation, an NGO that facilitates a level-playing field for the disabled, says Employability is about more than just finding jobs.

“It is aimed at finding the right job for the right candidate and sensitising companies about recruiting qualified disabled, instead of just quizzing a blind person on whether he could find his way to the toilet. It’s the qualification and candidate’s strength that matters, not if he or she has a crutch or a cane,” she explains.

The first job fair in 2004 was a success, attracting 32 companies and 600 candidates. The third edition in 2006 saw 74 firms choose from among 11,000 candidates.

“In the first two years, mostly IT and ITES companies participated but in the last edition, we had representation from the manufacturing, logistics and hospitality sectors,” Raveendran adds.

The next fair is scheduled on February 24, 2007 in New Delhi due to a flood of enquiries from candidates in north India. Candidates need to register before December 24 and companies by January 15 by visiting the foundation’s website, abilityfoundation.org.

Raveendran gave up her career spanning teaching, advertising and corporate communication to start Ability Foundation in 1996. She is an articulate speaker and is always on the lookout for out-of-the-box ideas to sensitise society towards the disabled.

Apart from the job fair, she also organises talent shows like dance and beauty contests where the differently-abled can rub shoulders with thorough professionals. She says that though such things appear to have changed for the better, many still nurse a narrow, stereotyped vision of the disabled.

“One cosmetic company refused to sponsor our fashion show saying disabled people never use cosmetics,” Raveendran adds.

G.C. Shekhar
gc_s@yahoo.com

“Employability is aimed at finding the right job for the right candidate and sensitising firms about recruiting qualified disabled, instead of just quizzing a blind person whether he could find his way to the toilet. It’s the qualification and candidate’s strength that matters, not if he or she has a crutch or a cane.”

J. RAVEENDRAN
Few thoughts to ponder for parents

We can understand your feelings and apprehensions about your child, who seems to show slower development than usual. It may perhaps give you a little solace to know that you are not alone in this situation. There are thousands of parents like you who have children with mental handicap. Neither you nor your child is to be blamed for his condition. However like any other child you would like to do all that which helps the child in his/her fullest development. Here are few points for assisting you in facilitating the development of your child:

- Your child can learn to become self-dependent in daily living skills e.g. bathing, dressing, self-feeding, attending to toilet needs and helping you in household chores.
- He can learn simple vocational skills and will be able to work and earn to whatever extent possible.
- He can learn better if the tasks can be simplified by breaking them in smaller and simple steps.
- Patience and perseverance on your part will be extremely important if you want to see him/her progress.
- Even a small achievement needs to be appreciated to encourage further learning and initiative.
- He will develop speech. Talk to him, encourage him to speak. Do not give up.
- Keep working on his language development.
- Constructive play activities are important. Help him develop interest in playing with toys, drawing and coloring, listening to music and watching TV. Play with the child and make learning fun.
- Give him as much success experience as possible. With your own judgment pick up skills which he is ready to learn, teach him small steps of learning a skill, keep encouraging him to work. Patience and perseverance are key factors in training.
- Take care of his feelings and emotions. You may see certain behaviors in him which may not easily go. He may keep doing things which you are telling him not to do. Love, Care, Firmness and Patience will be able to bring changes in his behavior.
- Your child is just like any other child. He needs to be loved, recognized, praised, disciplined and encouraged to learn various tasks needed for everyday life.
- Others would respect and value your child as much as you value and respect him. We may not be able to change others but we can definitely try to change our own attitudes and behavior.
- You should overcome embarrassment with regard to your child. It is very harmful for you as well as your child.
- Take him with you whenever you are going out. It can be going to market, meeting friends and going to social functions, marriages etc. It is only when you take him in public places that he would learn appropriate social behavior.
- Promote integration of children with disabilities in regular schools if they have facilities.
- It is important to remain engaged with normal life like going out, entertainment, meeting people and attending to your interests and hobbies.
- Do not over burden your other children with your anxieties and problems. Seek their support and explain to them about the importance of their cooperation.
- There is no age bar in learning. Like others, mentally challenged persons also keep learning throughout their lives.
- Love, firmness, patience & perseverance are key factors in helping the development of your child.

Source: - Muskan
Annexure

LIST OF INSTITUTIONS/ORGANISATIONS and NGOs WORKING IN THE FIELD OF EDUCATION OF DISADVANTAGES GROUPS

1. ACTION FOR ABILITY, DEVELOPMENT AND INCLUSION (AADI) Balbir Saxena Marg, Hauz Khas, New Delhi; Phone: 26569107

2. ACTION FOR AUTISM, Sector 5 Jasola Vihar, Behind Sai Niketan New Delhi 110025 Tel: 91-11-65347422, 40540991/92 Email: actionforautism@gmail.com Website: http://www.autism-india.org Focus Area: A Premier center for Standard Therapy of Autism and Learning disabilities.

3. AKSHAYA PRATISHTHAN, Sector D Pocket III, Vasant Kunj, New Delhi-110070; Phone: 26132565, 26124923; Fax: 26896143 Focus Area: Orthopaedically disabled; Locomotors disabled; Mentally ill.

4. AMAR JYOTI RESEARCH AND REHABILITATION CENTER Karkardooma, Vikas Marg, New Delhi-110092 Phone: 22151286 Fax: 22154936 e-mail: amarivoti@del2.vsnl.net.in Focus Area: Multiple disability.

5. BALVANTRAY MEHTA VIDYA BHAWAN-ANGURIDEVI SHER SINGH MEMORIAL ACADEMY Block E, G, & H Masjid Moth, Greater Kailash II, New Delhi-1 10048; Phone: 26441798, 26288815 Focus Area: Mentally ill.

6. CARENIDHI (CENTRE FOR APPLIED RESEARCH AND EDUCATION ON NEURODEVELOPMENTAL IMPAIRMENTS AND DISABILITY-RELATED HEALTH INITIATIVES) C-II/ 10, Ansari Nagar, A.I.I.M.S. Campus, N.Delhi-110029; Phone: 26857755 Fax: 26167459 E-mail: carenidhi@hotmail.com Focus Area: Multiple disability.

7. CHILD GUIDANCE CENTER, Department of Social Work (Delhi Univ.), 3 University Road, New Delhi-1 10009; Phone: 2725 7881 Focus Area: Multiple disability; Mentally ill; Behavioral problems; Learning disability.

8. CHILD GUIDANCE CENTER National Institute of Public Co -Operation & Child Development, 5, Siri Institutional Area, Hauz Khas, New Delhi -11 0016; Phone: 2696 3002/ 3204/ 3378 Focus Area: Multiple disability; Speech problem; Slow learners in the age groups 0-14; Scholastic problems.

9. MANOVIKAS KENDRA, Kulachi Hansraj Model School, Ashok Vihar Phase I, New Delhi 110052; Phone: 27124498 Focus Area: Multiple disability.

10. NATIONAL INSTITUTE FOR MENTALLY HANDICAPPED Regional Training Centre (North), Lajpat Nagar, New Delhi; Phone: 26820643 Fax: 26831012 Focus Area: Mentally ill; Orthopaedically handicapped.
11. **NCPEDP (NATIONAL CENTER FOR PROMOTION OF EMPLOYMENT FOR DISABLED PERSONS)**, 25, Yusuf Sarai, Green Park Extension, New Delhi-110016; Phone: 26854306, 26967910, e-mail: ncped@nde.vsnl.net.in
   **Focus Area:** Multiple disability.

12. **SADHU VASWANI INTERNATIONAL SCHOOL GIRLS**, 2nd Street, Shanti Niketan, New Delhi; Phone: 24670242, 26872390
   **Focus Area:** Slow learner.

13. **TAMANA ASSOCIATION**, D-6 Street, Vasant Vihar, New Delhi-110057; Phone: 26143853, 26148269 Fax: 26143853
   **Focus Area:** Mentally handicapped; Down's Syndrome, Autism.

14. **THE EDUCARE CHARITABLE TRUST [REGD]**, M - 2, Hauz Khas, New Delhi-110016; Phone: 26565061, 26857560 e-mail: sunitasodhi@hotmail.com
   **Focus Area:** Dyslexia; Attention deficit disorder; Learning disorders.

15. **THE ENABLING CENTER**, Lady Irwin College, Sikandra Road, New Delhi -110001; Phone: 23274411
   **Focus Area:** Multiple disability; Visually or Hearing Impaired; Cerebral palsy; Autism; Mentally retarded.

16. Mr. J.P Gadkari President - Parivaar NFPA, 23/1, Krishna Regency, Flat No. FC 1, First Floor K.R. Road. Tata silk Farm, Bangalore -560 004, Karnataka Tel: 080-26769087/26769074(R) (O) 26563267/26564608 (Fax)
   Other Addresses are given below.

17. **AALAM**, JB-35B Janta Flat, Hari Nagar, New Delhi-110064; Phone: 2549 9229
   **Focus Area:** Multiple disability; weaker section of society.

18. **ABHILASHA SPECIAL EDUCATION CENTER**, E-24B MIG Flat (DDA), G-8 Area, Mayapuri, New Delhi-110027; Phone: 25143123
   **Focus Area:** Mentally ill; Hearing impaired; Speech disorder.

19. **All YAVAR JUNG NATIONAL INSTITUTE FOR THE HEARING HANDICAPPED Northern Regional Centre**, Kasturba Niketan Complex, Lajpat Nagar II, New Delhi-110024; Phone: 26835093
   **Focus Area:** Hearing Impaired; Speech impaired.

20. **ADP-SOUTH DELHI (A PROJECT OF WORLD VISION)** 38 First Floor, Lajpat Nagar-II, New Delhi-110024; Phone: 26928695
   **Focus:** Orthopaedically handicapped, over all, community development.

21. **ASHRAY (ASSOCIATION FOR SOCIAL HEALTH & REHABILITATION ACTION BY YOUTH)** Basti Vikas Kendra, Tagore Road, Kamla Market, New Delhi-110002; Phone: 23232377
   **Focus Area:** Multiple disability.

22. **ASSOCIATION FOR THE DEVELOPMENT OF MULTIPLE HANDICAPPED CHILDREN** B-56, Defence Colony, New Delhi-110024 Phone: 24623548
   **Focus Area:** Multiple disabilities; Cerebral palsy; Post polio residual paralysis; Mental retardation.
23. **ASRA [ACTION FOR SELF RELIANCE AND ALTERNATIVE], WZ -14A, Jeet Shopping Market Budhela, Vikas Puri, New Delhi -110018; Phone: 25526844**
   **Focus Area:** Orthopaedically handicapped.

24. **ASTHA (ALTERNATIVE STRATEGIES FOR THE HANDICAPPED), S -268, Greater Kailash II, New Delhi-1 10048; Phone: 26419862**
   **Focus Area:** Multiple disability.

25. **BHARATIYA VIDYA BHAVAN, Kasturba Gandhi Marg, New Delhi -110001; Phone: 23389943, 23384881**
   **Focus Area:** Slow Learner.

26. **CHILD GUIDANCE CENTER, Zakir Hussain Memorial Welfare Society, Jamia Millia Islamia (TTT), New Delhi-110025; Phone: 2684255(R), 26843909**
   **Focus Area:** Mentally ill; Behavioural and speech problems; Educational problems.

27. **CHILD GUIDANCE CENTER, RAK College of Nursing, Lajpat Nagar, New Delhi-110024; Phone: 2643 6668**
   **Focus Area:** Mental disability; Psychological problems; Communication disorders.

28. **CHILD GUIDANCE CENTER, Dr. Z.H. Memorial Welfare Soc., Jamia Sr. Sec. School Camps, Jamia Nagar, N Delhi-25; Phone: 26843909**
   **Focus Area:** Multiple disability.

29. **CHILD GUIDANCE CLINIC, Kalawati Saran Children's Hospital, Bangia Sahib Marg, New Delhi-110025; Phone: 23735090**
   **Focus Area:** Multiple disability; mentally ill; Physical and emotional problems.

30. **CHILD GUIDANCE CLINIC Department of Psychiatry AIIMS, New Delhi-11 0029; Phone: 26594412**
   **Focus Area:** Mentally ill; Slow learners; Psychological disorders.

31. **CONCERNED ACTION NOW (CAN), B-IV, 3067 Aruna Asaf Ali Road, Vasant Kunj" New Delhi-110070; Phone: 26132815, 26122705; Fax: 26104865**
   **E-mail:** baquer@del2.vsn.net.in
   **Website:** www.indiv.nic.in/can
   **Focus Area:** All disabilities.

32. **DEPARTMENT OF PSYCHIATRY, Dr. Ram Manohar Lohia Hospital, Park Street, New Delhi-110001; Phone: 2336 5525/363**
   **Focus Area:** Multiple disability; Mentally ill, Orthopaedically handicapped.

33. **DEPARTMENT OF PSYCHIATRY, Safdurjung Hospital, New Delhi**

34. **FAMILY OF DISABLED (FOD), BJ/500, Janak puri, New Delhi-1 10058; Phone: 25597328**
   **Fax: 25502502**
   **E-mail:** foddelhi@yahoo.com
   **Focus Area:** Multiple disability.

35. **GENETIC AND MENTAL RETARDATION CLINIC, Dept. of Pediatrics, AIIMS, New Delhi-1 10029; Phone: 26561123**
   **Contact Person:** Prof. Ishwar C Verma
   **Focus Area:** Multiple disability; Genetic and birth defects.
36. GOVERNMENT LADY NOYCE SECONDARY SCHOOL FOR THE DEAF, Kotla Feroz Shah, New Delhi-110002; Phone: 23319419  Focus Area: Hearing impaired.

37. GOVERNMENT MODEL SENIOR SECONDARY SCHOOL -2, Ludlow Castle, 5, Shyam Nath Marg, New Delhi-1 10054; Phone: 23966853 Focus Area: Mutiple disability; Hearing impaired; Physical disability; Mental disability in the age groups of 5-18 Years.

38. INSPIRATION, AG1123D, Vikaspuri, New Delhi-110018; Phone: 25611861, 25412463  Focus Area: Mentally ill; Multiple disability; Autistic, Spastic.

39. MODEL SCHOOL FOR MENTALLY DEFICIENT CHILDREN, Kasturba Niketan, Lajpat Nagar, New Delhi-110024; Phone: 26834328 Fax: 26831012 Focus Area: Mentally retarded.

40. NEW DELHI YOUNG MEN'S CHRISTIAN ASSOCIATION Jai Singh Road, New Delhi 110001; Phone: 23746036, 23746034, 23361915; Fax: 23746035, 23746032  Focus Area: Mentally ill children; Development of community.

41. PAAJVAAR - A FEDERATION OF PARENT ASSOCIATIONS A-2520, Netaji Nagar, New Delhi-100023; Phone: 26870987, 2331711, 23318329 Fax: 23316674  e-mail: jaadishmehta@hotmail.com Focus Area: Multiple disability.

42. PRAKASH DEEP EDUCATIONAL & VOCATIONAL SOCIETY, 1 15308 -A, Street no 13, Balbir Nagar Extension, Shahdara, New Delhi -110032; Phone: 22174003  Focus Area: Multiple disability.

43. RAJKUMARI AMRIT KAUR CHILD STUDY CENTRE, Dept. Of Child Development, Lady Irwin College, Sikandara Road, New Delhi -11 0001; Phone: 23719859  Focus Area: Orthopaedically handicapped; Mentally ill; Visually impaired; Partially hearing impaired; Behavioural problems; Multiple disability; Autism; Cerebral palsy.

44. SAMARTH THE PROFESSIONALS, B-58, Tagore Garden Extension, New Delhi-110027; Phone: 25193726, 27294094 Fax: 25163106  Focus Area: Children (underprivileged).

45. SANJIVINI SOCIETY FOR MENTAL HEALTH, A-b, Satsang Vihar Marg, Outub Institutional Area, (south of IIT), New Delhi-110067; Phone: 26862222/4488 Web page: www.indiasocial.org/sanjivini  Focus Area: Emotional problems; Behavioral disorder.

46. THE INSTITUTE FOR THE PHYSICALLY HANDICAPPED (MINISTRY OF SOCIAL JUSTICE & EMPOWERMENT, GOVT. OF INDIA), 4, Vishnu Digamber Marg, New Delhi - 110002  Focus Area: Orthopaedically handicapped.

47. TRAINING CUM PRODUCTION CENTER, 20, North Avenue, Punjabi Bagh,
48. TRAINING-CUM-EARNING CENTER FOR HANDICAPPED WOMEN OF WEAKER SECTION, Institute No.1, Institutional Zone, Hudson Lines, Kingsway Camp, Delhi 110009; Phone: 27233967 Focus Area: Multiple disability.

49. VIMHANS (VIDYA SAGAR INSTITUTE OF MENTAL HEALTH AND NEURO SCIENCES) No 1, Institutional Area, Nehru Nagar, New Delhi -110065; Phone: 26310510, 26310520 e-mail: vimhans@vsnl.com Focus Area: Orthopaedically handicapped; Cerebral palsy; Learning disabilities; Neurological.

50. WELL BEING COUNSELING & HEALTH CENTER, U -158, Vats Complex (near subway), Main Vikas Marg, Shakarpur, New Delhi-110092; Phone: 22440556 Focus Area: Mentally retarded; Orthopaedically handicapped; Hearing impaired; Slow learner; Autism.

51. YMCA INSTITUTE FOR SPECIAL EDUCATION YMCA, Nizamuddin East, New Delhi-110013; Phone: 24699405, 24624061 Fax: 24634209 Focus Area: Mentally retarded.

52. ADVANCED MEDICAL REHAB CLINIC (AMRC), J.,222, at Sarita Vihar, New Delhi-110076, Phone: 41403344 (Centers also at Faridabad, Munirka, Dwarka); Focus Area: Cerebral palsy, autism, polio rehabilitation and other causes of locomotor and multiple disability Contact person: Dr. Ajay Gupta, Mobile: 9810692375, Website: www.rehabclinic.co.in; Email: info@rehabclinic.co.in

source: http://www.udaan.org/parivaar/orgdelhi.html and website of the Ministry of Social Justice and Empowerment, Govt. of