



## द्रीय पुरस्कार - 2008

2008, विज्ञान भवन, नई दिल्ली

### NATIONAL AWARDS FOR THE

### EMPOWERMENT OF

### PERSONS WITH DISABILITIES

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MINISTRY OF

SOCIAL JUSTICE



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**NIMH Newsletter is published and circulated with a view to reach out to all those who work in the field of mental retardation, including NGOs, Universities, State Directorates of Disabilities and Social Welfare, Policy makers at State and Central level.**

**The views expressed by the authors are not essentially the views of NIMH**

**Comments, Suggestions, Views and Contributions may be sent to :**

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Dear Patrons.....

Hearty New Year greetings to all of you.

We have been sharing, interacting, networking with each other for the last 25 years. Introspection into the 25 years of service of NIMH gives us the feeling of satisfaction that we could make humble achievement in enhancing the quality of life of persons with mental retardation in terms of developing the human resources, research and development, service models, dissemination of information, consultancy and extension and outreach activities. We had unconditional support from all our stakeholders such as the non-governmental organizations working for the cause of persons with disabilities more so from the field of mental retardation, parents associations and the professionals.

To commemorate 25 years of NIMH services, we have plans to organize academic and academic related activities for persons with mental retardation and other stakeholders for the next one year starting from February 2009. The tentative programs are given in detail in this issue. I extend warm welcome to all of you to join us to make these programs a success.

I take this opportunity to congratulate all the National Award winners for the empowerment of persons with disabilities for the year 2008 instituted by the Ministry of Social Justice & Empowerment, Government of India. I am also proud to inform that NIMH received the best applied research/technical innovation Award aimed at improving the life of persons with disabilities. This is the fourth National Award received by NIMH from the areas of best placement officer, best role model and best district (DDRC, Madurai).

NIMH has proclaimed vision, mission and value statements by which its objectives are met. As part of the introspection of our activities, we felt that we may take your opinion on whether to review the vision, mission and value statement or to retain it considering the developments taken place in the past years in the background of the acceptance of UNCRPD. Here again, I request your sincere comments on the options given in this issue.

This issue comes to you with articles from different angles on the broad area of disability rehabilitation. Your comments will help us to further refine our efforts in reaching you in better way.

With regards,

Yours Sincerely,

T.C.Sivakumar  
(Director)



**25 YEARS**

## **SILVER JUBILEE CELEBRATIONS**

**(February 2009 to February 2010)**

### **TENTATIVE PROGRAMME SCHEDULE**

<b>Sl. No.</b>	<b>Programme</b>	<b>Date &amp; Month</b>
1.	Creation of awareness among college students	Last week of <b>February, 2009</b>
2.	Creation of awareness through publication of posters on mental retardation	<b>March, 2009</b>
3.	State Level Media Conference	<b>April, 2009</b>
4.	National Workshop – Augmentative communication for persons with Mental Retardation	<b>May, 2009</b>
5.	National Institutes Sports Activities	<b>June, 2009</b>
6.	Creation of awareness among parents association	<b>July, 2009</b>
7.	Skit competition by twin cities college students on MR subject	<b>August, 2009</b>
8.	RCI Course Coordinators Meet	<b>September, 2009</b>
9.	State Level Commissioners Meet (CCD)	<b>October, 2009</b>
10.	Dance & Music (Very Special Arts) Festival	<b>November, 2009</b>
11.	Special Olympics	<b>December, 2009</b>
12.	Special Employees Meet with SAARC Countries Independent Living	<b>January 2010</b>
13.	International Conference	<b>20-22 February 2010</b>



# Adaptation In Gait Training

**Shri.T.C Sivakumar** - Director, NIMH, Secunderabad

**Mr. R. Nitnaware** - Lecturer – Physiotherapy

**Mr. K. Ramesh** - Vocational Instructor

**Mr. Sudhir Bhale** - Research Assistant

## Introduction

In persons with mental retardation the multiple disabilities is often present as a associated condition. Among this, physical disability alone accounts for 40%. Nearly 25% of the children has gait problems or problems in standing and walking.

There are two major abilities essential to walking. The first, equilibrium, is the ability to assume an upright posture and maintain balance. Locomotion, the ability to initiate and maintain rhythmic stepping, is the second. Although these two abilities are essential, there are many additional contributing factors involved in walking. The musculoskeletal system must provide intact bones and well functioning joints as well as adequate muscle strength. Normal muscle tone is very important and is controlled at the sub cortical level. Muscle tone must be high enough to resist gravity, but low enough to allow the movements. Reciprocal innervations of muscles allows for graded action between the agonist and antagonist muscles necessary for skilled movements.

Vision is also vital to normal walking. It is particularly important when other sensory input is reduced. Vision gives information about the movement of the head and body relative to the surroundings and is important for the automatic balance responses to changes in surface conditions. Other sensory systems that are important are the vestibular, auditory, and sensorimotor systems.

In short, normal gait requires the proper functioning of the musculoskeletal system and the nervous system, which often is poor in persons with mental retardation. The conventional method of therapeutic services for gait training generally begins with a parallel bar. A parallel bar has two supporting rods and it is adjustable in height and width according to the physique of the client. A mirror is also fixed at one end of the parallel bar for the clients to observe the gait pattern. A person having average/above average intelligence with gait problem may have a self-driven motivation to undergo this therapy. Since the training involves structured practice, which is monotonous in nature, children with mental retardation may not even have the motivation to undergo the therapy. They are often forced to the parallel bar for gait training. In order to facilitate the training requirements, it is possible that the principle of learning theory be adopted. Operant condition theory is one, which can be used to train the children with mental retardation for gait therapy. This can be achieved by presenting different audio and visual stimulus while taking each step on the floorboard of the parallel bar. The visual and auditory responses while using the parallel bar will act as the reinforcing agent for the client, thereby initiating and enhancing the motivational aspect to repeatedly use the equipment. The mechanism can be adjusted in such a manner that the reinforcing stimuli could be reduced and stopped in a phased manner as the client gains more confidence and control in the gait movement.



## Adaptation on Gait Training

In order to induce interest and motivation, it was felt that an introduction of audio-visual stimulations can attract the attention of the client while he/she make each steps on the parallel bar. With this intention a methodology was developed to introduce reinforcing agents in the form of audio and visual stimulation in a conventional parallel bar. The objectives were:

- ◆ To develop a parallel bar with a multipurpose feedback system for facilitating the gait training of children having mental retardation with locomotor disability.
- ◆ To have periodic assessments in order to detect gait and also to use the same records for documentation and further research requirements.
- ◆ For this study, 80 cases of mental retardation with gait problems were identified by taking the footprints on a paper sheet by applying stamp pad ink on the foot. The problems identified were foot displacement, misbalancing, hemiplegics gait, dragging feet, diplegic, walking on toes, wide based support CP clumsy gait, and slight instability in gait, right leg short and balancing problems. After the investigation of cases were over, the training for gait was initiated. This training was given by a conventional parallel bar method which was improvised with height and width adjustments and audiovisual reinforcements. During the process it was observed that without reinforcements it took about 40 seconds. Whereas with reinforcements it took only 29 seconds to walk over board which was recorded in field testing check list (Annex-1). The stride lengths, step lengths, and the speed were checked thereafter.

## The following technical aspects also considered for the study

1. Simple soft sensitive switches to press on the circuits.
2. Highly heavy duty switches
3. Flexible and fast conductive wires
4. Division of the instrument in four parts.
  - ◆ Digital walking path,
  - ◆ Visual reinforcement board and audio speakers
  - ◆ Operating key board
  - ◆ Standard conventional parallel bar.
5. Operating key board with switches and keys for
  - ◆ Audio on/off
  - ◆ Lights (visual) on/off
  - ◆ Main power supply on/off
  - ◆ Reinforcement rerecording switches
  - ◆ Microphone
6. Visual reinforcement lighting board having powerful and florescent color bright LED (Light Emitting Diode) lights in different colors (red, green, yellow, blue)
7. Water proof rexin placed between switches mounted rubber and top held cloth cover.
8. Velcro attachment given for the dust cleaning and maintenance.
9. Special audio and visual indicators given as a divider in the centre of the sensory path.
10. Heavy duty and standard electronics components used in the device.
11. Maximum water proof system built in walking path



## Outcome

The adaptation of Gait training project has proved successful in providing periodic assessments of gait problems. It has been able to measure the stride lengths, step length ratio, base of support and other important gait parameters. This adaptation has shown effective improvement in gait speed and the stimulations provided through reinforcement patterns and have also given impetus for persons with Mental Retardation to be a part of the process. This mechanism has been also successful in providing essential confidence and control in the gait movements.

## Advantages of the system

1. This machine is cost effective.
2. It requires minimum maintenance
3. It involves easy technology for making it useable for all.
4. It can be operated on AC/DC operating voltage 9 volts, 12 volts system.
5. It can also be operated on solar system.
6. The power line systems are covered aesthetically to safeguard electrical shocks.
7. This mechanism can avoid dependency, which may come across in any skill-training programme.
8. Special adjustments are made for Reinforcement patterns and digital switching system.
9. This device facilitates with different types of audio reinforcements, which can be rerecordable.
10. The device is easy to handle since it is divided into three detachable parts.

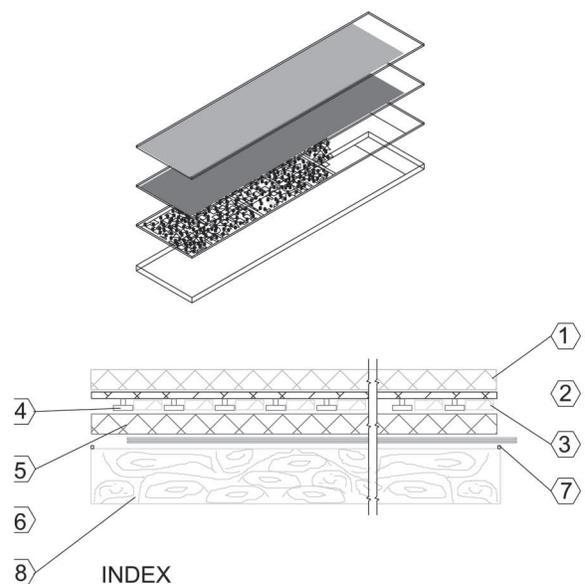
## Implications

When evaluating people with gait problems in the clinical setting, subjective descriptions fail to provide

the clinician with any quantifiable evidence that can be readily communicated. Therefore, it is vital to quantify these gait parameters under standardized conditions. This was a project mode to implement these factors so that pre-post as well as the periodic assessment can be made and documented training and for further research requirement. It also envisages to provide demonstrated training with parallel bar with a reinforcement patterns introduced as a therapeutic process for people with gait problems. This would not only enhance the confidence and control in clients but also make them independent in the process of walking.

*\*\*\* (This Adaptation in Gait training was developed as a project approved and funded by NIMH. The project team extend its sincere thank to the Academic Committee of NIMH, Director of NIMH and the clients and parents who supported to complete this assignment).*

**ADAPTATION ON GAIT TRAINING  
CROSS SECTIONAL VIEW OF PATH WAY**

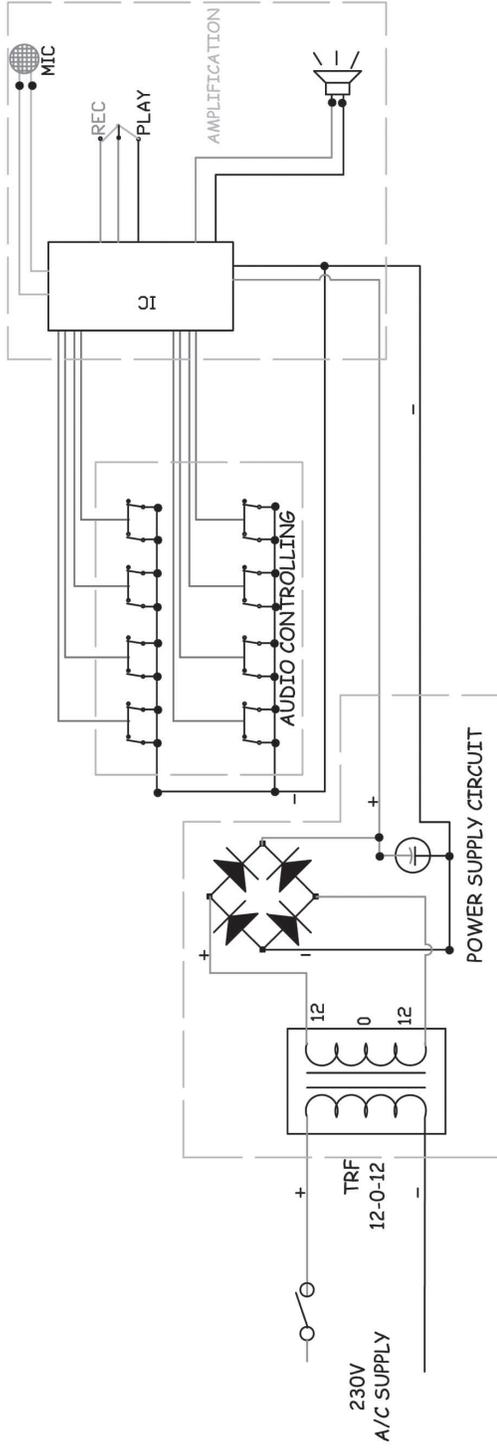


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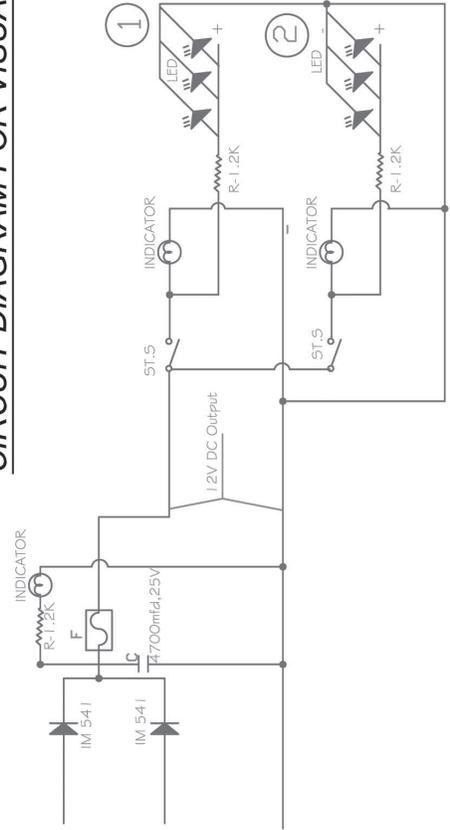
- 1.FELT CLOTH - 2'WX8'6"L
- 2.REXINE SHEET - 2'WX8'6"L
- 3.FOAM PIECES
- 4.DIGITAL SOFT TOUCH SWITCHES
- 5.RUBBER SHEET - 2'LX0.25"TKX8'6"L
- 6.CONDUCTIVE WIRES
- 7.BEADING - .3"HT X 1"TK X 21'LG
- 8.WOODEN BASE - 2'WX1.5"TKX8'6"L



ADAPTATION ON GAIT TRAINING  
CIRCUIT DIAGRAM FOR AUDIO REINFORCEMENT

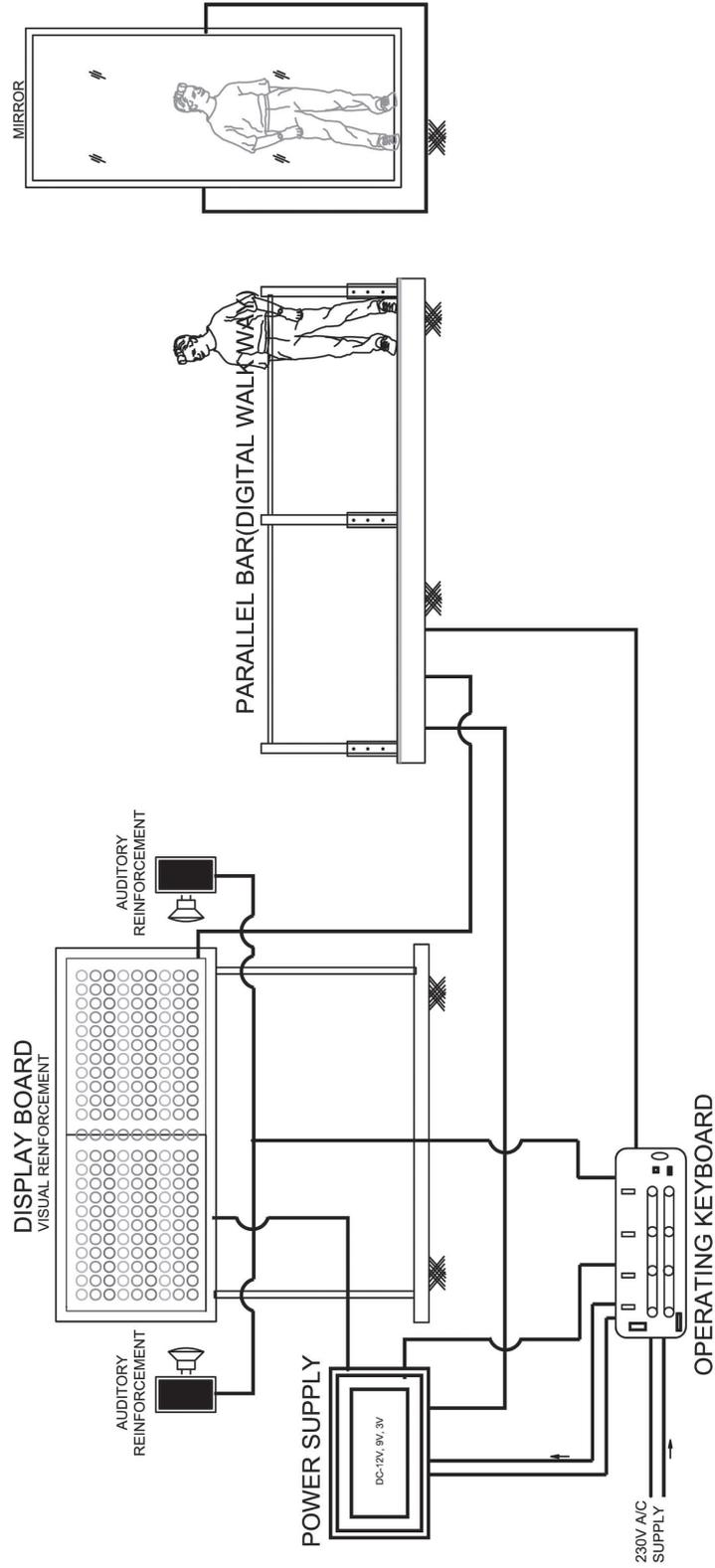


ADAPTATION ON GAIT TRAINING  
CIRCUIT DIAGRAM FOR VISUAL REINFORCEMENT





# ADAPTATION ON GAIT TRAINING PROCESS AND INSTRUMENTATION DIAGRAM





# Inclusive Vocational Training for PWDs

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## Definition

The inclusive training is a process of careful induction of PWDs in the quality mainstream Vocational Training of both formal and non-formal programmes to receive Vocational skill along with non-disabled persons. The “inclusion”, “full inclusion” and “inclusive training” are terms that have been narrowly defined to espouse the philosophy that all persons with disability, regardless of the nature or the severity of the disability, receive all vocational training within a mainstream vocational training environment. The vocational training is Centre based or community based.

## Special Vocational training

Traditionally programs for persons with disability have been segregated. If services were available, they were provided in separate schools, residential institutions, vocational training program and sometimes in work places while such special programmes can play a vital role for a small percentage of persons with disability, such as those with severe disability, there are serious limitations. In the domain of vocational skills training, a special program approach:

- ◆ Segregate persons with disabilities from the rest of society perpetuating the problem of isolation form, and lack of awareness on the part of the rest of society.
- ◆ Does not help persons with disabilities integrate into mainstream society.

- ◆ Often does not provide necessary vocational skill certification which is required by the labour market.
- ◆ Tends to track persons with disabilities into stereotyped training activities.
- ◆ Is less sustainable because funding for special vocational training systems.
- ◆ Is more at risk during economically difficult times.
- ◆ An alternative, more sustainable, approach is that of inclusive vocational Training where by persons with disabilities are integrated into general vocational skills training programmes.

## Principles of inclusive vocational training

- ◆ While some persons with disabilities may learn and perform in ways different from others they are still members of the group of trainees who are interested in benefiting from a training programme.
- ◆ Persons with disabilities have the same right and responsibilities as other
- ◆ Persons with disabilities are not a homogeneous group, their individuality particular strengths, aspirations and needs must be recognized.
- ◆ It is not the disability itself, but the effect the disability has on the individual's ability to access, learn and demonstrate knowledge and skills which is relevant.



## Obstacles to inclusive vocational training

The un and under employment rate for persons with disabilities worldwide is widely known to be higher than that of persons without disabilities. One of the reasons why persons with disabilities experience such high rates of un and under employment is because they have a difficult time gaining access to vocational skills training programmes. Limited access to vocational skills training programmes has denied them the opportunity to obtain marketable skills needed for gainful employment. Perry (2003) has identified some of the obstacles that confront persons with disabilities in their efforts to gain access to vocational skills training, such obstacles include the following.

- ◆ Negative attitudes towards their disabilities;
- ◆ Failure to meet entry requirements for Vocational Training programmes.
- ◆ Lack of Vocational orientation and guidance in selecting appropriate training programmes.
- ◆ Lack of confidence and experience of mainstream vocational training institutions in teaching / training persons with disabilities;
- ◆ Low self-esteem;
- ◆ Lack of policy support to increase the participation of persons with disabilities in vocational training.
- ◆ Lack of information about available
- ◆ vocational training programmes.
- ◆ Inaccessible transport
- ◆ Inaccessible training centres;
- ◆ over - protective families.

## Inclusive training guidelines

Vocational instructors in mainstream vocational training programmes have skills in the teaching and training. These skills are useful in the teaching of persons with disabilities who have been integrated

into a mainstream vocational training programme. The vocational instructor may find him/her self making some adaptations or modifications to his/her teaching and / or training methods in order to accommodate the person with disabilities. To follow are some simple guidelines that should be considered.

- ◆ Use a variety of teaching methods and presentation styles.
- ◆ Use plain language and minimize the complexity of communication
- ◆ Rephrase information if it is not understood.
- ◆ Stay on the topic; demonstrate; and use concrete examples.
- ◆ Write key points and assignments on the board and / or distribute through hand-outs.
- ◆ Arrange seating thoughtfully and face toward the class whilst speaking;
- ◆ Ensure that there is effective communication between yourself and the trainee. This may mean reading aloud material that is written on the black/white board or overhead transparencies;
- ◆ Some flexibility with assignment deadlines, assessment practices and extra reading time may be appropriate and will ensure persons are not disadvantaged because of their disability;
- ◆ Ask if assistance is required; don't assume it is, but be alert to the individual's needs.
- ◆ In workshop situations, the labeling of equipment, tools and materials is helpful.
- ◆ Resolve safety issues, if they exist, in a manner which respects the individual and his / her rights.

## Inclusive practice in vocational training programme

Persons with disabilities can benefit greatly from receiving vocational skills training in quality mainstream vocational training programmes. In order for persons with disabilities to maximally benefit from



a mainstream vocational training programme, instructors and other staff will need to adopt “inclusive” practices. “Inclusive” practices helps the individual with disabilities derive a maximum benefit from the learning environment. To follow are several examples of “inclusive” practices that an Instructor should consider when persons with differing disabilities are in a vocational training programme.

- ◆ Extra time permitted for the completion of assignments and/or tasks and not taking of information / explanations given by instructors.
- ◆ Availability of sign-language interpreters for trainees with hearing impairments who participate in verbal presentations made by instructors.
- ◆ Availability of note-taking services provided for persons with hearing impairments.
- ◆ Transcription of all text material to Braille format for persons with visual impairments.
- ◆ Availability of cassette tape recorders to allow persons with visual impairments of record verbal presentations, discussions and the like.
- ◆ Train vocational instructor to verbalize the content of all visually displayed materials for persons who have difficulties reading the whiteboard because of a visual impairment.
- ◆ Arrangements made to conducts tests or exams at different times or days if the individual needs extra time so as to not draw attention to him/her whilst in a classroom situation.
- ◆ Over head transparencies provided in text hard copy or Braille format for an individual who experiences difficulty reading overheads due to a visual impairment.
- ◆ Necessary adaptations and / or accommodations to ensure that the training environment is accessible to the person with a physical disability.

## Preparation of inclusive vocational training environment for persons with disabilities

- ◆ Persons with disabilities have unique vocational needs which are most effectively met using a team approach involving Instructors, administrators, parents and / or family members and PWDs.
- ◆ There must be a full range of programme options and support services so that the “team” can select the most appropriate vocational placement for the person with a disability.
- ◆ There must be adequate personnel preparation programmes to train vocational programme staff to provide specialized services to persons with disabilities who have been integrated into mainstream vocational skills training programmes. Therefore, vocational instructors must have access to training activities that will prepare them with the knowledge, skills and attitudes needed to ensure that inclusive vocational training programmes successfully prepare persons with disabilities with the marketable skills that are needed for gainful employment.

## Creating inclusive training workshop environment

- ◆ The workshop environment often needs a slight modifications and adaptation to the physical requirements of trainees such as wheel chairs users, mobility, impairments, visual impairments, intellectual impairments, and hearing impairments.

## Vocational training programme in inclusive support mechanism

A suitable vocational orientation and guidance to PWDs becomes an integral part of inclusive vocational.



Training programmes starting from identification of training skills till he or she is given successful post training assistance which leads self employment or paid employment. Multi sectoral coordination with the assistance of vocational councilor and vocational experts leads them to attain success in the process..

The Author was nominated by Government of India, Ministry of Labour and Employment (DGEJT) to participate in the ILO's Expert Group Meeting on "Inclusive Vocational Training for PWDs" held at Bangkok, Thailand in February 2006.



जिन्दगी बचानी है तो,  
धरती को हरा-भरा बनाना होगा ।  
देश को बचाना है तो,  
भ्रष्टाचार को मिटाना होगा ।  
समय आया है बोलने को,  
और सच की राह चलने को ।  
हाथ मिला ओ देशवासी,  
और भ्रष्टनीति को दो फाँसी ॥

पिंकु कुंडु  
M.Ed. Spl. Edu (M.R.)



धोका देना जुर्म  
दोका खाना शर्म  
जागो और जगाओ  
सर्वत्र व्याप्त है भ्रष्टाचार  
कहाँ जा रहा है संसार  
इस्से तुम मत मानो हार  
दूर करो यह भ्रष्टाचार

एम.एम.अली  
B.Ed. Spl. Edu (M.R.)

“देश में जागरूकता और सतर्कता फै लाएँ हम,  
भ्रष्टाचार की भ्रांति को दूर भगाएँ हम ।”  
“भ्रष्टाचार” नामक शैतान का नाश करें,  
चलो सर्वप्रथम खुद से ही सुरुआत करें ।  
“खुद रहेंगे ईमानदार,  
तौ खत्म होगा भ्रष्टाचार ।”

नरेद्र किची  
M.Ed. Spl. Edu (M.R.)





# Public Private Partnership for Person with Disability

**L.D. Jody Bascarane**

(MDRA 2005-07)

Public Private Partnership is a mode of implementing government programmes/schemes in partnership with the private sector. The term private in public private partnership encompasses all non-governmental voluntary agencies, such as the corporate sector, Voluntary organizations, Self-help groups, partnership firms, individuals and community based organizations, Public Private Partnership, moreover, subsumes all the objectives of the services being provided earlier by the government and is not intended to comprise on them.

The Roles and Responsibilities of Partners may vary from sector - to sector and Project to project.

In Public Private Partnership responsibility is shared by the Government as well as Private sector, hence the risk and reward are also shared between them, In Public Private Partnership the program becomes cost effective, shows higher productivity and enhance social services.

The main area of contract between Public & Private sector are in the funding factor, the tenure of agreement and share of risk and responsibility. This contract condition clearly defined before making the Public Private partnership.

In the field Disability Public Private Partnership is badly required in order to provide customer focused services in a cost effective way.

In Disability sector contract is mainly between the MSJE (Client) and NGO/VO (Services Provided)

The Ministry releases up to 90% of the admissible cost as grant and 10% of expenditure is to be borne by the NGO's which may be raised through Public/Private donations and user charges, agreement based on an annual basis as per the finance rules in force.

Selection VO's/NGO's is based on direct negotiation. Proposals of NGO, having proven capability are invited through state government/VT administrations grant-in-aid, up to maximum of 90% of the admissible cost of the scheme is provided in tow equal installments directly to the VO's / NGO's by the central government on the recommendations of state / VT administrations / any other prescribed agency by the Ministry. Voluntary organizations are required to submit periodically the performance report and utilization of grant released during the year. In case, the inspecting agency finds any irregularity of grant released during the year. In case, the inspecting agency finds any irregularity in irregularity / misappropriation of grant released, the grant is withdrawn and the ministry take appropriate action to extent of blacklisting the organization. Name of the blacklisted organization is also put on the website of the ministry.

Monitory of NGO's is done on the basis of performance reports and utilizations of unds for the purpose the grant was released. As per the procedure laid down, inspection in carried out by the State Government / UT Administrations / any other prescribed agency. The involvement of community, family, neighbourhoods



and voluntary organizations under public private partnerships is observed to have lead to empowerment of person with disability in an effective and efficient way.

**Reference :**

Report of the Public Private Partnerships sub-groups social sector-Government of India, Planning Commission.

[www.nic.in](http://www.nic.in)

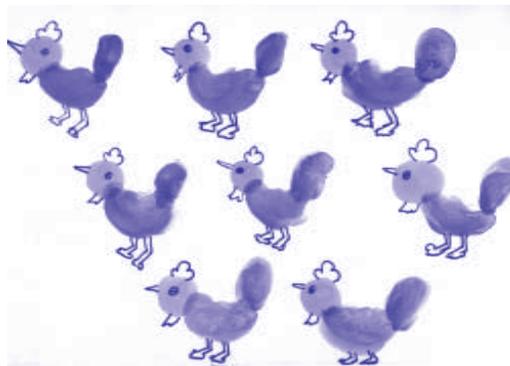
The World Newsletter - September 2005.



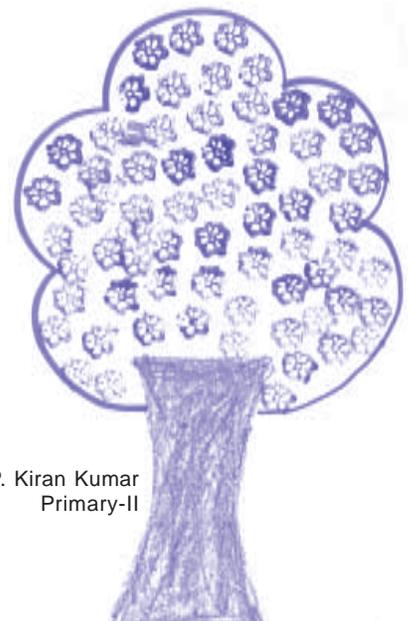
**Performance of Arts by Students of Special Education Centres, NIMH**



K. Sai Prasad  
Primary-II



Divya, ECSE



P. Kiran Kumar  
Primary-II



C. Manojna  
Primary-II



# Community Mobilization

## for Equal Opportunities of Person with Disabilities

**Rajnish Ranjan**

*MDRA 2005 - 07*

### Introduction

#### What Is Community Mobilization?

Community mobilization aims at: closing the gap between the services and people, strengthening local capacities and enhancing local governance.

#### The Concept Of Community Mobilization

The concept of community mobilization is to strengthen. Problem-solving capacities in the community level. So in many aspects persons with disabilities in the community are given due consideration in providing equal opportunities and participation in each and every aspect of programs in the community levels. Community mobilization addresses at the top and the bottom level to strengthen the capacities and capabilities of local communities and of service providers to strengthen persons with disabilities.

#### Community Mobilization Aims At

- ◆ Making society (people) aware and sensitize about the various aspects of the potentials of persons with disabilities.
- ◆ Encourage persons with disabilities to use their community resources continuously.
- ◆ Improving self help capacities (the ability to act) and capabilities (the knowledge how to act).
- ◆ Enhancing local governance.
- ◆ The basic idea is to provide equal opportunities by strengthening and problem solving and functional capabilities in the communities.

- ◆ So the main aim of the community is to providing those tasks and responsibilities so that they develop confidence and capacities.
- ◆ Community groups are supported to take charge of their resources and decisions on how these bring equal opportunities in the society and how these are to be implemented. They are made aware about the system of service providers of the state, NGOs and private sectors on how to bring about the changes in the society in bringing equal opportunities persons with disabilities.
- ◆ One of the main aims of the community mobilization is to establish constructive dialogue and working relationships.

#### Why Community Mobilization?

Community mobilization is the pivot for a people centered development process. It encourages better use of own resources, establishing own capacities and willingness' to contribute: passive recipients become active partners in development.

Community mobilization is a process of empowering local communities and vulnerable groups and combining awareness creation, self-organization and action

Community mobilization helps in promoting stability and includes confidence building for investment and development.

So when the persons with disabilities are concerned in the community mobilization it focuses in great responsibility for the communities in considering the



efforts to safeguard their problems and to provide equal opportunities.

### How Does It Works?

- ◆ The second part explains how community members are planned and sensitized regarding the upliftment of the persons with disabilities by local partners with the support of community mobilizers.
- ◆ The third reflects in roles, attitudes and perceptions of community mobilizers as facilitators for the persons with disabilities.
- ◆ The final part takes stock and discusses possible contributors to local peace building.

### Community Mobilization is Successful if

- ◆ Community members are more aware and take due responsibility in providing equal opportunities and services.
- ◆ The communities ensure that all the persons with disabilities in terms of caste, creed, sex, and religion as citizens of their societies may exercise same rights and obligations as others.
- ◆ As a part of process of equal opportunities, provisions should be made to assist persons with disabilities to assume their full responsibility as members of society.
- ◆ They should receive the support they need within the ordinary structures of education, health, employment and social services.
- ◆ The principles of equal rights in the community implies that the need of each and every individual is of equal rights in the community implies that the need of each and every individual is of equal importance, that these needs must be made the basis for planning of societies and that all resources must be employed in such a way as to ensure that every individual has equal opportunity for participation.

- ◆ Community should ensure that the responsible authorities distribute up to date information on available programmes and services to persons with disabilities, their families, professionals in this field and the general public. Information to persons with disabilities should be presented in accessible forms.
- ◆ To provide models for the political decision-making process required for attainment of equal opportunities, bearing in mind the widely differing technical and economical levels, the fact that the process must reflect keen understanding of the cultural context within which it takes place and the crucial role of the persons with disabilities in it.
- ◆ Local community workers should be trained to participate in areas such as early detection of impairments, the provision of primary assistance and the referral to appropriate services.
- ◆ Community should be aware of the rehabilitation services available in the local community where the persons with disabilities live.
- ◆ Community members should be active enough for the participation of the persons with disabilities in the design and organization of rehabilitation services concerning themselves.
- ◆ Community should develop local rehabilitation programmes for all groups of the persons with disabilities. Such programmes should be based in the actual individual needs of the persons with disabilities and on the full participation and equality.
- ◆ Community should support the development and provisions of personal assistance programmes and interpretation services, especially for persons with severe and/or multiple disabilities. Such programmes would



increase the level of participation of persons with disabilities in everyday life, at home, at work, in school and during leisure time activities.

- ◆ Persons with disabilities and their families should be encouraged to involve themselves in rehabilitation for assistance as trained teachers, instructors or counselors

In the longer run, community mobilization aims at enhancing local governance that can give ample opportunities for the growth and development of the persons with disabilities in the community and is subjected trust worthy.

### **Important Areas to be Considered in the Community Mobilization**

To promote development and governance, community mobilization needs to address and balance three concerns:-

- ◆ Asset based support: -poor resources, poverty, lack of information, lack of advocacy, conservativeness, illiteracy, need a long term support and assistance by different sectors (NGOs, public and private) to overcome the acute problems of persons with disabilities.
- ◆ Capacity building: - institutional building and capacity building is the core of community mobilization. It assists in the organizational development and strengthen social networks at the local level and encourages transparent and accountable community institutions for the persons with disabilities

Further more community mobilization seeks to links the corporate sectors e.g., “banks” to the village to strengthen the economy and empowerment to the persons with disabilities.

- ◆ Local governance: -community mobilization creates the demand for institutional accountability and responsibility from the office

bearers of government institutions, as well from NGOs.

Community mobilization creates incentives self-organization and services.

The instruments, principles and attitudes of community mobilization need to fully integrate persons with disabilities into the work of partner institutions, such as government departments, NGOs and local leaders.

This can be done through: -

- ◆ Training
- ◆ Main streaming of best practices
- ◆ Joint learning on the job.

### **Community Mobilizers As Facilitators**

In terms of community mobilization there are many professionals those are working with the local communities and service providers who facilitate the community. They are competent to keep dialogues with persons with disabilities in the process of understanding their problems regarding their target areas for equal participation in the community levels. They are competent to dialogue with persons with disabilities to apply relevant tools good communication and co-operations. Thus community immobilizers: -

- ◆ Facilitate dialogue, establish contacts and working relationships, and encourage contributions
- ◆ Initiate, encourage, advice, but leave the main responsibility to the persons with disabilities to local communities
- ◆ Strengthen the self-confidence and capacity of people to voice their needs and interest.
- ◆ Encourage local entrepreneurs and leaders to invest into business and employment so that they can improve their social standing and boosted their self-esteem.



Thus the introduction of equal opportunities of the persons with disabilities early in the life of working sectors will contribute to their acceptances equal members of work force, promoting cohesion in the working environment.

The community role is to balance the process of maintaining and preserving the relations between the persons with and without disability.

On one hand, capacity, building encourages people with and non-disabled to contribute, establishing relationship in the matter of sharing equal opportunities between local implementing partners and service providers.

### Perceptions and the Attitude

In the processes of community mobilization each and every individual should reflect their own perceptions and attitudes in the process of upliftment and mainstreaming in the society.

- ◆ Roles and responsibilities: -should initiate and plan adequate policies for the persons with disabilities at the local level, and stimulate and support actions at local levels.
- ◆ The needs and concerns for persons with disabilities should be incorporated into general development plans and not to be treated separated
- ◆ Teaching and training to the persons with disabilities to take individual responsibility is the key tasks of community mobilization.
- ◆ Negotiating space for local action: - village

communities are the diverse societies with different classes, caste and gender. Different spaces have to be found for the persons with disabilities for different social classes, public meetings, informal gatherings, and private chatting.

- ◆ Self-reflection: - in the process of community mobilization the community mobilizers have to reflect on themselves and their values:
- ◆ Do we have and show respect for the persons with persons with person with disabilities
- ◆ Do we empathize with the persons with disabilities
- ◆ Are we prepared to develop a close relationship with them?
- ◆ Relationship: - space and time are critical factors in building relationship with people with disabilities. Open and warm relations has to be welcomed
- ◆ Joint learning: learning in an ongoing process, and it is a collective action. Joint learning takes place when community mobilizers, community mobilizers and officers and associations for persons with disabilities exchange ideas and discuss on the ongoing issues and the process of development of the communities. This helps in creating conducive environment to create a culture wherein persons with disabilities unreservedly express their ideas, fears, needs and aspirations.





## Model Villages

**Sundar Vadaon**

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The father of the National Mahatma Gandhi had dreamt of Gram Swaraj & Model Villages. He had always foreseen self reliant and peaceful Model Villages. Similarly several great leaders of various Nations v.z. Abraham Lincon, Nelson Mandela, Nasser and Mao have dreamt of Model villages in various Countries across the globe.

Indian civilization and culture is the oldest in known history of Human Kind. Indus valley, Mahanjodaro Harappa and vedic age and culture are very well known in the world. Several Nations have followed Indian civilization and culture.

Nagarjuna, Arya Bhatta, and many other scholars have very elaborately preached regarding educational, cultural and economic development of the human kind, the preachings of which were followed by many Nations in the world.

From Nagarjuna to Amarthiyasen our great Nation had offered vision, and wisdom for the well being of Human kind. From Emperor Ashoka to Vivekananda to Tagore we have shown how concerned we are regarding the development of the Human kind.

For Several centuries, there was no caste system in India. In the initial period caste was related to the avocation in which one is involved. From being peaceful, progressive, and visionary over the centuries the villages are divided on caste, community, land and resources in to fragments both in the mind and on the ground.

Just as partition of India had its aftermath repercussions, the divisions and fragmentation of villages had its irreversible damage for several centuries. Hence the concept of Model Villages seen in the contemporary reality with its historical loss of time and resources making a great Nation stagnant, degraded, degenerated, under developed and still developing even after 5,000 years of its history and civilizations.

Added to the woes, as if they are not enough, National with not even 500 years history and civilization are involved in reverse teachings and preaching of how best we develop our villages, how we should restructure our institutions, how we should give fillip to our growth and economy, and how best we utilize their technical, scientific and economic support and how we should focus on reduction of poverty and how we should live and service. What has not been achieved over centuries will always remain as historical failure giving scope for any number of world leaders to preach and teach us of what we should have done simply as a way of life.

It is unfortunate that our great Nation has now slipped into the position of Nation of followers, than Nation of leaders for the World. Some where down the line the character of on average Indian has changed from being simple, honest, and pure, to the character of hypocrisy and duplicity of thought and action.

Over the centuries majority of the people of our National have been relegated to migrant labourers,



from our great villages, migration of both within the Nation, and outside and in the contemporary world being the people amenable to body shopping whether it was in the era of brain drain or even in the current era of reverse brain drain, of the age of BPO's, KPO's and call centres.

From being powerful people in more or less self-reliant villages, we have become dependents and parasites whether it was PL480, World Bank, other developmental agencies, poverty reduction projects or even employment guarantee scheme.

Both in our Nation and in the World umpteen number of preachers and teachers were born, umpteen number of institutions were created for poverty reduction which served as rehabilitation centers for the have-nots and have remained where they are for centuries.

As if the developmental process is not continuous and progressive, the entire process of development had to begin again from the Dawn of independent India.

The colonial era, The British Raj, the divide and rule policy have all achieved their objectives of fragmenting and plundering the Nation of its rich natural, human, cultural, economic and intellectual resources making the Nation a resource-poor and developing Nation.

Any number of success stories of Indians contributing greatly to the economic, scientific, and intellectual development of other Nations, more of USA, Canada, UK, Australia & New Zealand can be seen, as long as Indians are living and working abroad, and the paradox of opposite is a reality if they were to return to India and live and work in Indian system, shamelessly making our system to be notoriously known in the world of all its man-made maladies as a sign of the negative progression in the last six decades of governance of Independent India.

From the famous speech on the eve of Independence of Jawaharlal Nehru of "Thirst with Destiny" to his famous words that the dams are "Temples of the

Nation" to "Garib Hato" of Indira Gandhi to "Our Nation lives in villages" of Rajiv Gandhi to that "We have introduced employment guaranteed scheme" of Manmohan Singh and Sonia Gandhi, to the observations that "self-help groups are revolutionizing the development process in rural approaches, policies, programme, projects and the so-called people-centered policies and participatory development, no doubt of making certain in roads in to the process of development and change, and achieving of Model Villages still remaining a distant dream.

A great number of efforts were put in whether it was the so-called planned process of development, mixed economy, top to bottom and bottom to top approaches, decentralization of Panchayat Raj, 73rd and 74th amendments of the constitution approaches for employment of poor women, children, youth, senior citizens, Govt. & NGOs collaboration, external aid, Nationalization of Banks, efforts for promoting rural credit, green and white revolutions, second green revolution and second freedom struggle all of which have no doubt contributed for revival of economic growth, reconstructions of villages and reversal of degradation of resources in the villages, and the ultimate goal of "Model Villages" still to be achieved.

Govt. of India had been playing a very proactive role since the introduction of integrated Rural Development Programme in 1981, Drought-Prone areas Programme in 1983, to establishment of Rural Development, Human Resources Developments, Women & Child Departments concerning the Welfare of the people in the villages with required schemes and release of funds directly targeting the poor in the villages, as well as focusing on poverty reduction and economic development of vast masses in the villages.

Through the Ministries of Environment & Forest, Wasteland Development Board, Eco Development Board, great fillip to Rural Development, Agriculture and Agri-related activities natural resources as well



as Human Resources Developments were attempted so as to focus on Integrated Development of the Villages.

India and China were similarly placed sixty years ago what china had achieved in the last six decades is what India had missed. Base foot teachers, doctors and social workers have revolutionized the development processes of china more so in rural China. Unfortunately in our great Nation of Teachers and preaches, who gave vision and wisdom to whole World centuries ago, the post independent Indias teachers, doctors and social workers along with lethargic beurocracy have let us down so badly resulting in the present mess in which we are all pushed, in to China is on its way to become a super power while we are still struggling for the same in our Nation.

While the first five years plans have focused on agriculture, second five years plans have focused on irrigation. Similarly later plans have focused on industrialization, education, employment finally culminating to focus on eradication of poverty, promotion of Human Development and empowerment of the poor.

Our first Prime Minister Jawaharlal Nehru was a visionary. Similarly we had great leaders at the helm of affairs, several committed beurocrats, and many devoted social workers but unfortunately the coordination and cooperation required among various agencies was never forth coming to the required extent resulting in a or very slow pace of development.

India is the only country in the World which was witnessed the second doubling of population in 50 years. While the population below poverty line were about 45% at the time of independence, 36% at 1971, and around 20% at 1991. While the percentage of population below poverty line is halved, the number of poor below poverty line are doubled due to second doubling of population. All the positive indicators of

development were affected resulting in stagnation of economic growth.

While sixties and seventies have seen focusing on the education & employment, in eighties the focus was on poverty reduction, in Nineties it was on Human development and 21st century's focus is on empowerment and rights based campaigns for empowerment of the poor, women, children, senior citizens and the youth.

United Nations Development Programme (UNIDP) is publishing Human Development reports since middle of Nineties i.e. for the last decade. As per the HRD Report of 2005 India is ranked at 135th position in Human Development index. Several Nations such as srilanka etc are ahead of us in HDI. Low literacy rates, poor nutrition levels, low in comes, and low life expectations at birth are contributing to poor HDI.

Rich and developed Nation such as USA Canada, UK, Australia, New Zealand, Japan & Sweeden have very good HD indexes.

Amerthyasen in his book on Indian Development has elaborately dealt on how Kerala State in well developed and the so called BIMARU States are languishing in HD Indices. In our Country Kerala, Tamil Nadu, Karnataka, Andhra Pradesh, Maharashtra, Punjab, Haryana and Gujarat have better HDI compared to Uttar Pradesh, Bihar, Assam Orissa, Rajasthan, Jammu & Kashmir and other States.

Since last 4-5 years planning Commission of India and several States are publishing the State Human Development reports. There are now conscious efforts to focus on development of various States of our Country.

Govt. of India during the last two decades have initiated several proactive measures for development of poor resource villages.

In late eighties by launching National Literacy Mission and by giving fillip though zilla saksharatha samithies



the focus was on literacy and education for all. The Govt. of India has brought in campaign approach of promoting education for all. I was fortunate to implement literacy campaign in Nalgonda, Chittoor and Anantapur districts from 1990-1995 the period of which has seen massive social mobilization, volunteerism and several linkages of literacy with developments. Similarly by launching National waste lands development Board, & eco development Boards, fillip was given to natural resources development.

ICDS is being implemented for the last two decades as one of the very important programme of targeting the mother and preschool going children, and as the years passed by due to ICDS, several of Women and children were benefited in our country.

Ministry of Environment & Forest Govt. of India issued guidelines for people participation and sharing of usufructs through participatory joint Forest management and over the years through out the Country thousands of VSS are formed with positive results of protection of forests, ecological reconstructions and positive growth rate in forests of our country.

Through IRDP and Trysem fillip was given in various rural evocations of providing self employment ventures with subsidy resulting in several lakhs of people coming out of poverty line. Similarly training for self employment (Trysem) was also given fillip which resulted in thousands of people taking up self employment activities.

Through DPAP, fillip was given to the integrated water shed development for the villages affected by Drought and low rain fall, which had resulted in participatory water sheds development activities in thousands of water sheds in India resulting in increased level of ground water, increased production and increased income level of stake holders in the water shed Development activity.

The funding to Rural Development, Agriculture, Agri related areas has been tremendously increased by the Govt. of India over the years. Similarly, several new schemes have been introduced for welfare of rural poor.

Last 3-4 decades have seen tremendous improvement in NGOs Sector working for rural poor. There has been rapid growth of organizations working in rural areas, as well as the levels of funding by Govt. of India and external funding agencies resulting in tremendous growth, yielding results in Govt. & NGO collaborations.

Since 73rd & 74th amendments of the constitution, fillip was given to decentralization of Panchayat Raj Institutions and empowering them with development assistance. Rajiv Gandhi as PM had given real fillip to activities of PR Institutions and also focus on IT & IT enables services. Rajiv Gandhi had envisaged village knowledge centers for information revolutions.

Along side, the Govt. and the NGOs have put in several efforts of poverty reduction, empowerment of poor, and integration resources development by mobilizing local resources, from the Govt. International development agencies as well as from individual donors committed for the cause of the social development.

Similarly several corporate sectors industries are also actively working for corporate social responsibility of focusing on social development. Several NRIs and the individual donors are also coming forward for development of the villages.

Several banks and insurance companies are also focusing on social development under community based approaches.

A new phenomenon of individual donors from developed Countries donating very high amounts for social development in poor countries also is being done which is a very positive sign of various role players in the field.



We have very rich experiences and expertise of implementation of campaign mode of development.

The campaign mode of development was a very innovative approach of implementing a campaign for holistic development of a district.

### **The salient features are**

1. Mass mobilization for creation of awareness, motivation and peoples participation.
2. Networking of the efforts of all the developmental functionaries.
3. Pooling of Physical & financial resources.
4. Self reliances & Gram Swaraj
5. Integrated Natural and Human Resources Development.

We have implemented campaign mode of development in the districts of Nalgonda, Chittoor and Ananthapur from 1990-1996 and it had yielded excellent results. Subsequently, the approaches were replicated in several other districts of A.P. and other States of our Country.

### **The impact of campaign mode of development are**

1. Administrations has reached to the door steps of the people.
2. Voluntarism and voluntary social work was promoted to a great extent.
3. Participatory developmental efforts and approaches yield good results of resources development.
4. Developmental linkages with literacy and development campaign towards education for all, Health for all Environment for all could be seen due to village Committees working for integrated development.
5. Community resources mobilization, shramadan etc., were very evident of peoples involvement in the campaign mode of Holistic development.

More or less such approaches have been replicated by various State Governments in several parts of the country.

Whether it was micro planning and bottom to the top approach of Govt. of Kerala, Adarsh gao yojana of Govt. of Maharashtra, Janmabhoomi and Indiramma Programmes of Govt. of Andhra Pradesh, villages self Govt. of Madhya Pradesh, Right to information approach of Rajasthan and similar and several other efforts of various other State Govt. of our Country, essentially good governance and participatory approaches of various Govt. catalyzed efforts can be seen.

Similarly whether it was seemul undong of South Korea, or Grameena Bank experience of Bangladesh, similar approaches and efforts of peoples centered integrated resources development can be seen.

Ultimately the need of the hour is to reorient all the approaches & efforts towards achieving the goal of Modern Villages.

The following are the suggestion for achieving the Model Villages.

1. Each of the districts of each of the State is required to be divided, demarcated and delineated on micro water shed basis, based of GIS and GPS based approaches so as to have a scientific approach of Natural resources development.
2. The micro water sheds are required to be prioritized in to very high, medium and low priority water sheds and treatment has to be based on prioritized water sheds.
3. Ridge to valley basis approach is required to be adopted in integrated resources development through water shed approach.
4. Model Village may be defined as one in which there is an integrated Natural & Human resources development through peoples



- participation, where in people are in harmony with Nature for peace, progress and prosperity.
5. Model Villages can also be defined as the village in which due to integrated Natural and Human resources development, the livelihoods are improved, education and economic levels are improved there are improved income levels leading to overall improvement in resources development and economic development of the villages.
  6. An integrated, resource Development plan based on micro planning is required to be prepared for each village through PRA and participatory so as to reflect the felt needs of people and elicit people's participation in development.
  7. A participatory poverty assessment is required to be done for each of the family so as to have life cycle approach of planning for each member of family for development.
  8. Families who are below poverty line, poor, marginalized, land less poor are required to be identified for promoting resources development.
  9. Swot analysis is required to be implemented for identifying strengths and weakness of the people.
  10. Community resources generation is required to be promoted in a big way. Low cost approaches are required to be promoted followed by cost effective approaches and cost approaches.
  11. Ridge to valley treatment of soil & moisture conservation, rain water harvesting and integrated resources development is required to be done aimed at conservation of Water, Soil and enhancement of livelihood and production and productivity of the micro water shed.
  12. Integrated waste lands development is required to be taken up matched with resources development so as to promote rain water harvesting, resources development and enhancement of productivity and promotion of employment to vast rural masses.
  13. Protection of village eco systems desalting of village tanks and promotion of ground water recharge is required to be taken up so as to promote integrated development of villages.
  14. In the Ridge areas if reserve forest areas are available community joint forest management with people's participation is required to be taken up so as to promote protection, conservation and resources development of precious forest areas.
  15. In community lands i.e., common property resources of the villages, integrated development is required to be promoted and taken up for maximizing the production of CPR areas.
  16. All efforts to promote environmental conservation, Prevention of pollution and promotion of resources development is required to be taken up.
  17. Traditional practices of rain water harvesting, resources development, traditional culture, customs etc more so in tribal & backward areas are required to be taken up aimed at protection of village eco system with traditional wisdom.
  18. Adequate focus is required on HRD with focus on education. All efforts to promote education for all including school drop outs, disabled, and adult illiterates to be taken up so as to achieve EFA.
  19. Health for all is required to be taken up with adequate focus on life cycle approach and also to see that all efforts are put in so that all the age groups are properly attended to in their requirement of Health needs.
  20. Employment for all is required to be taken up with employment guarantee schemes, self employment opportunities and even regular employment opportunities available.



21. Environment for all is required to be given priority.
22. Water for all is required to be given fillip with clean drinking. water and adequate water availability for domestic needs.
23. Shelter for all is required to be focused with sufficient opportunities of providing shelter for the people.
24. Infrastructure of the village in term of rural roads connectivity etc is required to be given priority.
25. Sanitation for all is required to be focused in a big way.
26. Rural cooperatives of Agriculture, Dairy, artisan are to be promoted. Marketing of the products to be given priority.
27. Self helps groups with adequate credit and marketing linkages are required to be promoted in a big way.
28. While the positive approaches, micro credit is required to be promoted, the ills of micro finance is required to be checked toughly.
29. Agriculture is required to be promoted in big way with all its requirements of inputs, subsidies, scientific methods, high yielding varieties, credit linkages, adequate marketing for the products and a very proactive approach of promoting farming.
30. Agri related horticulture, sericulture and floriculture are required to be promoted in a big way.
31. Animal husbandry and Dairy is required to be promoted in a big way including promotion of door step artificial insemination services so as to maximize milk production.
32. The Dairy cooperatives are required to be promoted in a big way.
33. Fisheries, aviary piggery and any other avocations are required to be promoted.
34. Tree planting in all the vacant lands, road side, Railway line etc., is required to be promoted in a big way.
35. Villages knowledge centers are required to be promoted so as to utilize IT enabled services for forming, agri related activities, drought relief, disaster management and resources development.
36. Through village knowledge centers E-commerce is required to be promoted, so as to promote marketing of the products of SHGS, several artisans, involved in commerce.
37. Net working of the efforts of Govt. & NGOs are required to be taken up.
38. Volunteerism and voluntary social work is required to be promoted in a big way.
39. Adoption of villages by industries, NRIs, Philanthropists etc is required to be promoted.
40. Corporate social responsibility is required to be roped in for resources development.
41. Child labour is required to be eliminated totally by promoting education of school going children.
42. Social evils are required to be prevented.
43. Replication of successful model villages approaches are required to be done.
44. The strength of the village in term of community resources etc., is required to be promoted so as to achieve long term development.

Ultimately by promoting integrated and holistic development, and by empowering poor women, SCs, STs, Back ward people, tribal, disabled and other disadvantages and by focusing on education, employment, income and economy and by promoting multi sectoral coordination and convergence among the government departments, NGOs and peoples committees and by joint action for holistic development of model villages can be created and developed.





# Theory of Sampling

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## Sampling

Sampling is simply the process of learning (knowing) about the population on the basis of a sample drawn from it. A sample is a subset of the population units. The process of sampling involves three elements:

- ◆ Selection of the sample
- ◆ Collecting the information based on the sample
- ◆ Making inference (estimate) about the population

## Advantages

- ◆ Low cost and less demand on personnel because of smaller coverage.
- ◆ Higher speed with which the results can be obtained
- ◆ More reliable and accurate information can be collected by deploying better trained personnel with close supervision

## Essentials of sampling

- ◆ **Representative:** A sample should be so selected that it truly represents the universe, otherwise the results obtained may be misleading
- ◆ **Adequacy:** The size of the sample should be adequate, otherwise it may not represent the characteristics of the universe.
- ◆ **Independence:** All items of the sample should be selected independently of one another and all items of the universe should have an equal chance of being selected in the sample

- ◆ **Homogeneity:** means that there is no basic difference in the nature of units of the universe and that of the sample.

## Objective

The **objective** of sampling is to provide value of the **statistic** that is adequate estimate of the **parameter**. This **adequacy** is measured in terms of lack of bias and in terms of Standard Error (SE) of the estimate.

An estimator is called **unbiased** when its average value over all possible samples from a population is the same as the value of the parameter

## Important terms

### Population

It is the target group to which the investigation results are intended to be applied. Another term for population is universe.

Ex: For distribution of Aids and appliances under ADIP scheme for persons with loco motor disability the target population could be all existing clients with loco motor disability in India

In a study of 'Educational Programming for Students with Profound Mental Retardation' in a country, the target population could be all existing cases of persons with PMR in that country.

### Sample

A sample is the subset of the target population. We can draw several samples out of the same population depending up on the size of the population.



## Complete Enumeration

The study of population is called complete enumeration or CENSUS.

## Sampling

The study of sample is referred to as sampling.

## Parameter and Statistic

A parameter refers to a population and Statistic refers to a sample.

For example the values obtained from a study of a sample, such as Mean (average) and Standard Deviation (Dispersion), are known as '**Statistic**' such values if we compute for the population they are called '**Parameter**'.

A **Parameter** is a single value obtained to describe in a summary fashion the pertinent (relevant / significant) characteristics about a population

A **statistic** is a single value obtained to describe in a summary fashion the pertinent (relevant / significant) characteristics about a sample

## Sampling Unit

Items included in a population are called sampling units. That is the population must be capable of division into what are called sampling units.

## Sampling frame

In order to cover the population decided upon, there should be some list, map, or other acceptable material, called sampling frame, which serves as a guide to the population to be covered.

For example, in a Socio Economic survey for selecting people in a town, the sampling unit might be an individual person, a family or a household or block in a locality.

## Sample size

The number of subjects in the sample (sampling units) is called sample size denoted by '**n**'. The number of

subjects in the entire population is denoted by '**N**'. The ratio  $n/N$  is called **sampling fraction**.

## Methods of Sampling

The various methods of sampling can be grouped under two broad heads.

- ◆ Probability sampling (known as random sampling)
- ◆ Non-probability sampling (known as non-random sampling)

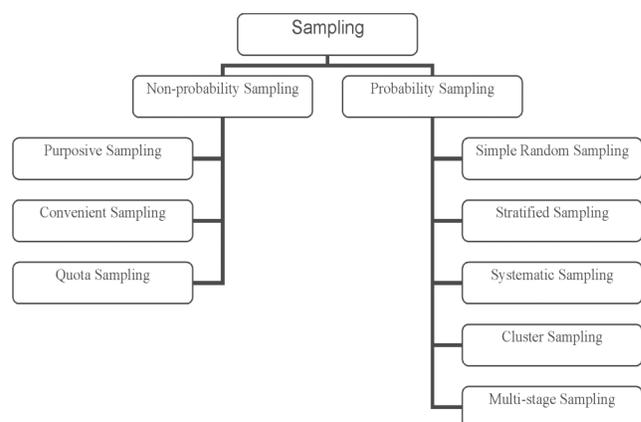
**Probability sampling** methods are those in which every item in the universe or population has a known chance, or probability, of being chosen for the sample. The sampling procedure of items from the universe will be chosen strictly at random.

Probability sampling provides estimates of the parameter which are essentially unbiased with a greater precision.

**Non-probability sampling methods** are those which do not provide every item in the universe with a known chance of being selected in the sample. The selection procedure is, at least, partially subjective.

Non-random sampling is a process of sample selection without the use of randomization.

The *basic difference* between probability and non-probability sampling is the pattern of sampling variability can be ascertained in case of random sampling, where as in non-random sampling, there is no way of knowing the pattern of sampling variability.





## Non-probability Sampling

- ◆ Judgment (purposive) sampling
- ◆ Convenience sampling
- ◆ Quota Sampling

### Judgment sampling

It is a type of non-random sampling and is also called purposive sampling or deliberate sampling. In this method of sampling the choice of sample items depends exclusively on the judgment of the investigator. In other words, the investigator exercises his judgment in the choice and includes those items in the sample which he thinks are most typical of the universe with regard to the characteristics under investigation.

This sampling procedure is justified in the circumstances when only a small number of sampling units is in the universe.

This method is not scientific because the sampling units to be sampled from the population may be affected by bias of the investigator.

### Convenience Sampling

In this method the sample is obtained by selecting 'Convenient' sampling units from the population. The method of convenience sampling is also called the *chunk*. A chunk refers to that fraction of the population being investigated which is selected neither by probability nor by judgment but by *convenience*.

For example, a sample obtained from readily available list such as registration of cases in a hospital or from an institute, telephone directories etc.. is a convenience sample and not a random sample even if the sample is drawn at random from the lists.

For example, if a student is to submit a project report on 'Awareness of normal school going children on mental retardation' and he takes school close to his institute or house or office and interviews some pupil over there, he is said to following convenient sampling method.

Convenience sampling is prone to bias as the sampling is not based on randomization. Hence, the results obtained by this method of sampling can hardly be representative of the population.

### Quota Sampling

Quota sampling is a type of judgment sampling, and is perhaps the most commonly used sampling technique in non-probability category. In a quota sample, quotas are set up according to some specified characteristics such as so many in each of level of retardation, so many in each age, so many in each gender, so many in each class, and so on.

For example, in a survey on 'affect of teaching mathematical skills through computers for the mentally retarded children', the investigator told to conduct the study on 30 MR children and that out of every 10 children taken for the study 5 are to be mild level and 5 from moderate category, the sample is said to follow a quota sampling.

In quota sampling, the sample with in each cell is not done a random; the field investigators are given the choice of selection of respondents to meet their quotas.

## Probability Sampling Methods

### Simple or Unrestricted Random Sampling (SRS)

Simple Random Sampling widely known as SRS is most widely used probability sampling technique in research today. It is the technique of drawing a sample in such a way that each unit of the population has an equal and independent chance of being included in the sample. That is in a population of 'N' units the probability of drawing a unit is  $P(U) = 1/N$ .

### Selection of the Sample

**Lottery method** – simple method

This is a very popular method of taking a random sample. Under this method, all items of the population



are numbered or named on a separate slips of paper of identical size and shape. These slips are then folded and mixed up in a container or drum or box. A blindfold selection is then made of the number of slips required to constitute the desired sample.

### Table of random numbers

If the population size is very large lottery method becomes cumbersome and an alternate method of selection is using of random number tables developed based on randomization technique. Several random number tables of random numbers are available, among which Tippet's (1927), Fisher and Yates (1938), Kendall and Smith (1939) and C.R.Rao and Mitra (1966) are popular and extensively used for drawing a sample using SRS method.

### Stratified random sampling

Stratification means division into layers. Based on the character under study, the population is divided in to various groups (called strata) such that

- ◆ Units with in each group are as homogeneous as possible
- ◆ The group means are as wide as possible

Thus, In stratified sampling if 'N' is the total size of the universe, and we divide the whole population in to three stratum (in such a way that the units with in each strata are homogeneous) of sizes  $N_1$ ,  $N_2$  and  $N_3$  so that  $N_1+N_2+N_3=N$ .

A simple random sample is then chosen independently from each group (strata) of sizes  $n_1$ ,  $n_2$  and  $n_3$  out of  $N_1$ ,  $N_2$  and  $N_3$ .

The total sample 'n' out of the total population units 'N' is obtained by adding the three samples  $n_1$ ,  $n_2$ ,  $n_3$  drawn from each stratum of the same population.

Sample size 'n' =  $n_1+n_2+n_3$  (Remember, population 'N' =  $N_1+n_2+N_3$ ).

### Proportional and Disproportional Stratified Sample

- ◆ In a proportional stratified sampling plan, the number of items drawn from each strata is proportional to the size of the strata. For example, if the population is divided into three groups and their sizes are 50, 30 and 20 percent of the population and if a sample of 180 is to be drawn from the population, the desired proportional sample may be 90, 54 and 36 from the three respective groups to make the total sample size is 180 out the total population.
- ◆ In disproportional stratified sampling an equal number of cases or subjects are taken from each stratum regardless of how the stratum is represented in the universe. That is in the above example, we take a sample of 60 from each of the three groups (stratum) to make the total sample 180 regardless how the stratum is represented in the sample.

### Systematic Random Sampling

Systematic sampling is a commonly employed technique, if the complete and up-to-date list of the sampling units of the population is available.

**Procedure:** This consists of selecting the first unit at random, the rest being automatically selected with a predetermined pattern, involving regular spacing of units, called *sampling interval*. Suppose, in a population of 'N' sampling units, the units are numbered from 1 to N in some order, a sample of size 'n' is drawn out of 'N' such that

$$N = nk, \text{ implies } k = N/n$$

**Example:** Suppose we want to draw a sample of 20 subjects out of a total population of 100 subjects for a specific study. So, we number the subjects from 1 to



## PROFESSIONAL COURSES OFFERED AT NIMH



Sl.No	Courses Offered	Eligibility	Duration
<b>A. Post Graduate Courses</b>			
1.	M.Phil in Rehabilitation Psychology	MA Psychology MSc Psychology	2 years
2.	M.Phil in Special Education	M.Ed in Special Education	1 year
3.	Master in Disability Rehabilitation Administration	Bachelor Degree or Equivalent Degree in Disability Rehabilitation recognized by the RCI	2 years
4.	M.Ed Special Education	B.Ed Special Education	1 year
5.	Post Graduate Diploma in Early Intervention	M.B.B.S, B.O.T, B.P.T, B.Ed., B.Sc (ASLP)	1 year
<b>B. Graduate Courses</b>			
1.	B.Ed Special Education	Any Degree	1 year
<b>C. Diploma Courses</b>			
1.	Diploma in Vocational Rehabilitation	Intermediate	1 year
2.	Diploma in Early Childhood Special Education	Intermediate	1 year
3.	Diploma in Community Based Rehabilitation	Intermediate	1 year

For further details contact: Academic Section, NIMH  
**Website:** [nimhindia.org](http://nimhindia.org), **Email:** [nimh\\_hyd@eth.net](mailto:nimh_hyd@eth.net),  
**Tel:** (040) 27751741-45 (235/246), **Fax:** 27750198

# Visitor's News

Prof. Dr. Leopold Curfs, Maastricht University, The Netherlands visited NIMH along with Prof. Jeyachendran, Director, Vijay Human Services on 21.11.2008. The purpose of his visit was to study the opportunities of having joint projects in the sector of rehabilitation of persons with mental retardation. Further to share their experiences of providing services to children with mental retardation having specific medical problems with Indian counterparts. Prof. Curfs was taken to all the services offered at NIMH for persons with mental retardation. During his visit he interacted with the staff and the parents of children with mental retardation. Following his visit a meeting was organized with the faculty members in which Prof. Curfs explained the services offered at their university for children with mental retardation.



Impressed by your activities  
and your organization.  
Looking forward to collaborate  
There are some very good  
opportunities!  
Today it was an important day  
hopefully we can put it into your  
already impressive list of activities  
LEOPOLD M G CURFS  
UNIVERSITY MAASTRICHT  
GOVERNOR KREMERS CENTRE

Shri. K.M. Acharya, Secretary to Government of India, Ministry of Social Justice and Empowerment, visited NIMH on 08.12.2009. He showed keen interest to view all the activities of NIMH and had interaction with the staff and the families of persons with mental retardation.

It was good to visit  
NIMH today, and get to know  
about its various activities.  
Hope, the Institute will  
strive continuously to improve  
its services, academic programmes  
and R & D work, and outreach  
services.  
My Best Wishes to the Institute  
Acharya  
(K. M. ACHARYA)



## National Award



Shri. T.C.Sivakumar, Director, NIMH receiving the National Award for  
“Best applied Research”  
from Shri. Ansari, Hon’ble Vice President of India on 3<sup>rd</sup> December 2008.

### **BEST APPLIED RESEARCH/ TECHNOLOGICAL INNOVATION AIMED AT IMPROVING THE LIFE OF PERSONS WITH DISABILITY**

#### **National Award**

The National Institute for the Mentally Handicapped, Secunderabad, has made significant contribution in the area of gait training of persons with mental retardation who have gait instability. The research project was developed to adapt the traditional gait training method through improvisation of the conventional adjustable parallel bar through audio visual reinforcement and height and width adjustment. A digital switching system was introduced in the base floor. The system is simple, cost effective, requires low maintenance and can be made usable universally.



## Courses Offered At Regional Centres



Sl.No	Courses	Centres
<b>Graduate Courses</b>		
1.	Bachelor in Rehabilitation Therapeutics	Delhi
2.	B.Ed in Special Education (Mental Retardation)	Mumbai, Kolkata
3.	B.E. in Special Education (Distance Mode)	Delhi, Mumbai
<b>Diploma Courses</b>		
4.	Diploma in Early Childhood Special Education (Mental Retardation)	Mumbai
5.	D.Ed. Special Education (Mental Retardation)	Mumbai, Kolkata
6.	Diploma in Vocational Rehabilitation (Mental Retardation)	Mumbai, Kolkata

**For further details contact: Academic Section**

**Delhi** : 011-29818712

**Mumbai** : 022-27875277, 27560803

**Kolkata** : 033-25311357, 25317838



100. Then  $K = 200/20 = 5$ . So the sampling interval in this case is 5. Select the first one at random out of the 100 units, then the other units in the sample will be selected by adding the sampling interval 5 to the selected number and so on.

For instance if the first subject is number 3 (chosen at random) then the second one in the sample is obtained by adding 5 to 3, that is 8 and so on. Following the same procedure we get the other units of the sample. That is 3, 8, 13, 18, 23, 28, 33, 38, 43, .....

### Cluster Sampling

When the primary sampling units of the groups (called clusters) are not large, that is when they generally contain a small number of subjects, then it is sometimes advisable that these units are not sampled further. All the elements in the selected clusters are then surveyed. In other words, in this method of sampling the population is divided, depending on problem under study, into some recognizable subdivisions which are termed as clusters, and a SRS of these clusters is drawn. We then observe, measure and interview each and every unit in the selected clusters.

'N' = total number of clusters

'n' = number of clusters chosen (sampled at random through SRS)

$M_i$  = number of sampling units in the  $i^{\text{th}}$  cluster.

Then total sample size drawn out of the population is  $\sum m_i$ .

That is sample size =  $\sum m_i$ , where 'T' is the number of clusters in the sample.

**Example:** Let us say the population is divided into 10 recognizable clusters of uneven sizes of sampling units and three clusters, say cluster 3, cluster 7, and cluster 9 are drawn at random out of the 10 total clusters using SRS, with sampling units say 15, 25, and 10 in each cluster. Therefore, the total sample for the study in

this situation is sum of these three cluster units which is equal to  $15+25+10 = 50$ .

### Multistage Sampling

This is an extension of cluster sampling. Instead of enumerating (or covering) all the sampling units in the selected clusters, we use sub sampling (by SRS) within each cluster, it is called multi stage sampling. That is Multistage sampling will be done in two stages, one is at cluster level and another is selecting the units from each cluster.

### Size of the Sample - factors influencing the sample size

An important decision that has to be taken in adopting a sampling technique is about the size of the sample. Size of the sample means the number of sampling units selected from the population for investigation. Some have suggested that the sample size should be 5% of the size of the population while others of the opinion that sample size should be at least 10%.

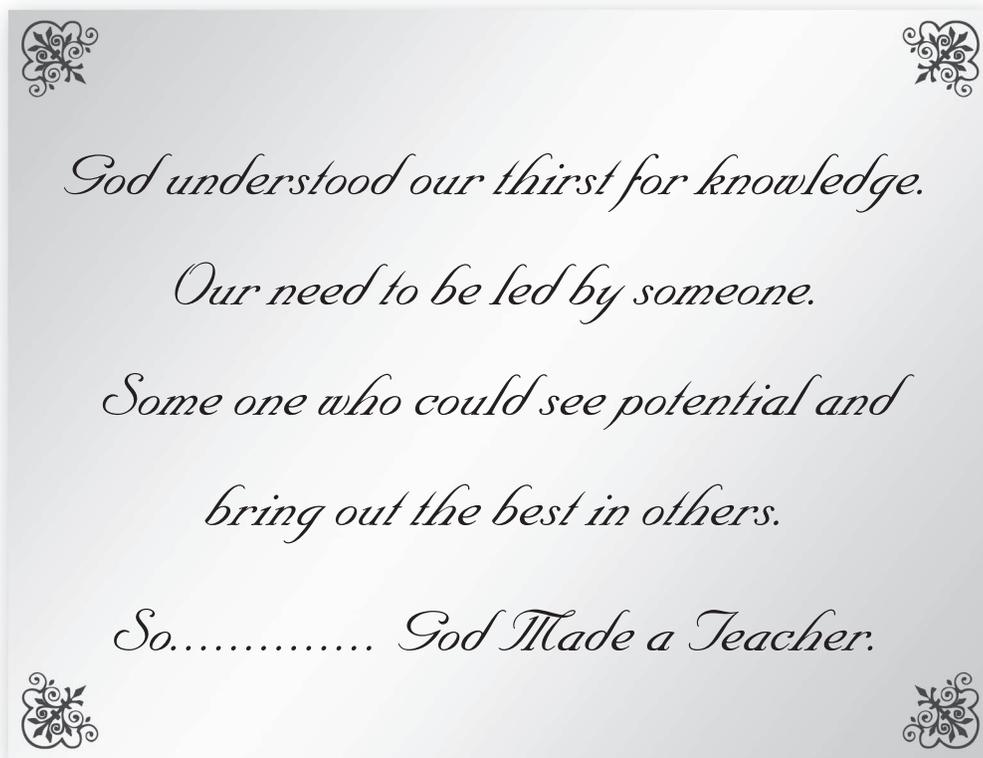
However, the following factors should be considered while deciding the sample size, because they may in other words influence the sample size..

- ◆ **The size of the universe:** The larger the size of the universe, the bigger should be your sample size.
- ◆ **The resources available:** If the resources available are vast a larger sample size could be taken. However, in most cases resources constitute a big constraint on sample size.
- ◆ **The Degree of accuracy or precision required:** The greater the degree of accuracy required the large should be the sample size. It does not mean that only bigger samples always ensure greater accuracy. If the sample is selected by experts by following probability sampling method, it may ensure better results even when the sample is very small.



- ◆ **Homogeneity or Heterogeneity of the universe:** If the universe consist of homogeneous units a small sample may serve the purpose but if the universe consist of heterogeneous units a large sample is inevitable.
- ◆ **Nature of study:** For intensive and continuous (follow up) study a small sample may be suitable. But for studies which are not likely to be repeated and are quite exclusive in nature, it may be necessary to take a larger sample size.

- ◆ **Method of sampling adopted:** The size of the sample is also influenced by the type of sampling plan adopted for the study. For example, if the sample is a simple random sample it may necessitate a bigger sample size. However, in a properly drawn stratified sampling plan, even a small sample may give better results.
- ◆ **Nature of respondents:** Where it is expected a large number of respondents will not co-operate and send back the questionnaire without filling, a larger sample should be selected.





# NIMH Activities

## Short Term Training Programmes

### Workshop on social capital in disability rehabilitation

A workshop on social capital in disability rehabilitation was organized by the department of community rehabilitation and project management from 20<sup>th</sup> – 21<sup>st</sup> October 2008. The main objective of the workshop was to discuss the possibilities of exploring the use of social capital and its related concepts in the field of disability rehabilitation. The



workshop was attended by the prominent leaders from five reputed organizations involved in extending disability rehabilitation services. The workshop was facilitated by Shri. T.C.Sivakumar, Director NIMH, Dr. L.Govinda Rao, Lead Partner (Disability) Byrraju Foundation and Shri.N.C.Srinivas, Head Dept.CR&PM. During discussion it was felt that the concepts of social capital and social marketing needs to be shared on large scale by conducting the seminars and conferences.

### Training programme on “Use of Theatre arts in communication training for Professionals and Special Educators”

A training programme on “Use of Theatre arts in communication training for Professionals and Special Educators” was conducted from 20-24 October, 2008. 15 professionals from all over India attended the programme. The participants were exposed to various components of communication aspects, awareness through street play and mono action for creating an awareness and to develop communication among persons with mental retardation.

### Training Programme on Vocational Training and Job Simplification

The programme was conducted from 24<sup>th</sup> November, 2008 to 28<sup>th</sup> November, 2008 with the objectives (i) To enable designing & planning of workstations suitable for persons with mental retardation (ii) To increase productivity and to reduce fatigue of persons with mental retardation. A total of five participants working in the field of mental retardation have participated in the programme. The





programme was useful for assessing vocational abilities of persons with mental retardation for application of ergonomic principles and to acquire adequate practical and theoretical knowledge in setting up of work stations suitable for persons with mental retardation. The programme also envisages the skills on design and development of adaptive devices to suit to persons with mental retardation. The programme study the existing work environments coming out with suitable modifications and planning work stations suitable to persons with mental retardation. The programme was coordinated by Shri K. Ravinder, Rehabilitation

### **Workshop on “Accessibility of Housing for Persons with Disabilities”**

A workshop on “Accessibility of Housing for Persons with Disabilities” was held at NIMH on 2.11.2008. 23 participants from different background were participated in the meeting. The meeting was headed by Shri.Sundeep Khanna, Chairman, Madhya Pradesh



Housing Board and Smt.Anitha Rajendra, Commissioner for Disabilities & Senior Citizens Welfare. The core objectives the programme was collecting new ideas for barrier free environment, sensitize the planner at macro and micro level and to seek suggestions, recommendations from Govt., NGO's, Social Activists, Architects and Builders for

the benefit of persons with disabilities. During the programme several recommendations were made on size of the flats, space of house (external and internal) changes in the design of house lay out to improve the quality of lives of persons with disabilities.

Shri.Sundeep Khanna stated that architects must look from the angle of persons with disabilities and their needs in the accessibility of housing such as proper ventilation and good natural lighting, small kitchen next to bedroom, necessary ramps, design of staircase, turning space, colours of switches, Braille inscription, and wide areas for wheel chairs.

The session concludes with remarkable suggestions expressed by the members of the meeting which needs to be more interaction with policy makers that will benefit all the persons with disabilities.

### **Master Trainers’ Programme on Siblings Training**

The Master Trainers’ programme on Siblings Training was conducted from 17<sup>th</sup> November, 2008 to 28<sup>th</sup> November, 2008 at NIMH, Secunderabad with the objectives (i) To develop human resources for training the siblings of persons with mental retardation (ii) To equip Master Trainers to meet the information needs of siblings of persons with mental retardation (iii) To impart importance on documentation while conducting Siblings Training Programme (vi) To prepare Master Trainers to organize Community Based Siblings Training Programme

Three participants from the states of Uttar Pradesh, Andhra Pradesh and Manipur have participated in the programme. The participants of the Master Trainers’ Programme conducted three days Siblings Training Programme in collaboration with Radha Institute for the Mentally Handicapped, Hyderabad from 25<sup>th</sup> November, 2008 to 27<sup>th</sup> November, 2008 at Hyderabad



as a part of their training programme. A total of 56 siblings of persons with mental retardation attended this three days programme. Feed back received from the Master Trainers' participants as well as siblings revealed that the over all programmes were very informative and useful to them. The programme was coordinated by Shri S.P. Singh, Faculty in Special Education, Department of Adult Independent Living, NIMH, Secunderabad.

### Certificate Course on "Psychological Assessment"

A certificate course on "Psychological Assessment" was conducted from 3<sup>rd</sup> -28<sup>th</sup> November 2008 at NIMH, Secunderabad. Eleven psychologists from different parts of the country attended the course. The topics covered during the course are screening and developmental assessment, intellectual assessment, assessment of adaptive behaviour, neuropsychological assessment, psycho educational assessment and vocational assessment. Practical hands-on experience of testing persons with mental retardation was given to the participants. Each participant carried out psychological testing using various psychological tests.

### Programme on Incentive Scheme on Employment of Persons with Disability

A meet was organized on "Incentive for employing Persons with Disabilities In Private Sector" at Jubilee Hall, Public Gardens, Nampally On 8<sup>th</sup> December, 2008 as conveyed by the Secretary to Govt. of India, Ministry of Social Justice & Empowerment. Accordingly the meet was organized on 8<sup>th</sup> December, 2008. Smt. N.Rajyalakshmi, Hon'ble Minister for Women Development, Child Welfare, Welfare of Disabled and Senior Citizens, Govt of Andhra Pradesh is the Chief Guest and Shri K.M.Acharya, IAS, Secretary to the Govt of India, Ministry of Social Justice



From the left Smt. Chaya Ratan, Principle Secretary, A.P.; Smt. Nedurumalli Rajyalakshmi, Minister A.P.; Shri K.M. Acharya, Secretary to GOI; Shri Ashish Kumar, DDG, GOI.

& Empowerment was the Guest of Honour for the programme.

The members participated in the Meet represented by (a) Industrialists (49 members) from Private Sector and (b) NGO's (24 organizations) from Andhra Pradesh, representatives from AP State Govt Departments (39 members) with Press (14 members) attended the meeting at Jubilee Hall.



Shri T.Shiva Kumar, Director, addressing the gathering

The National Institute for the Mentally Handicapped was represented by the Heads of Department (5 members), Persons with Disabilities (PWDs) (4 members), and supporting staff (12 members) to help in organizing the meet at Jubilee Hall. In total 152 members attended the Meet.

Shri T.C.Sivakumar, Director NIMH welcomed the distinguished invitees to the Meet. A brief report on



status of Employment of PWD's in the country and introduced the Scheme to the members in the house by Shri Ashish Kumar, Deputy Director General, Govt. of India, Ministry for Social Justice and Empowerment. Shri K.M.Acharya, IAS, Secretary to Govt of India, Ministry of Social Justice & Empowerment has highlighted the scheme and the role of collaboration between Govt of India, Ministry of Social Justice & Empowerment, Employer's Provident Fund, ESI and State Departments to facilitate implementation of the scheme.

Shri Bhanwarlal, Principal Secretary to State Govt. of Andhra Pradesh, for Dept of Labour, Employment, Training & Factories and Industries stated that there must be efforts initiated to support the training costs of the PWD's to ensure that training is extended for employment without interruption. He also stated that the State will further organize similar Meet in different regions of the State, for spreading awareness about the scheme. Smt Chaya Ratan, Principal Secretary to the Govt. of Andhra Pradesh has assured the members of facilitating the implementation of Scheme in the State.

The Invitees from NGO and Industrial Sector welcomed the scheme and requested for training the PWD's in Information Technology. Some entrepreneurs requested to initiate collaboration with Department of Disabilities Welfare (AP State) and NIMH, to initiate efforts in employing PWD's in their organizations shortly. Parents of PWDs requested for providing awareness on details of the scheme as how to access to the concerned departments specified along with the scheme details.

### **Celebration of Gandhi Jayanti**

On October 2<sup>nd</sup> to mark the celebration of Mahatma Gandhi Jayanti, NIMH had undertaken an activity of planting fruit bearing trees to maintain the ecological balance of the environment from the



increased pollution levels. The samplings were planted by Mrs.Banuka Narmada Mallikarjun, Member, Secunderabad Cantonment Board, Shri T.C.Sivakumar, Director, NIMH, Shri B.V.Ramkumar, Dy.Director (Admn.), NIMH, children with mental retardation, the students and staff members of NIMH. These saplings will be properly nurtured and maintained by NIMH. This activity was served as a training programme to persons with mental retardation attending NIMH services. These sincere efforts of the institute are the humble contribution of towards making the existing lush green, serene ambience of NIMH campus in particular and to add to greenery of the city in general.

### **Vigilance Awareness Week**

Vigilance Awareness Week was observed during the period from 3-7 November, 2008. The pledge received from Chief Vigilance Commission was taken by all the staff members and students of NIMH. The message on anticorruption was displayed on the notice boards of NIMH. In order to raise awareness among the users about the services provided, procedures, complaint handling policy, avenues available for redressal of grievances etc., various programmes were conducted including competitions in the events such as essay writing, slogan writing, skit, elocution and posters with messages etc.



## हिन्दी पखवाड़ा समोराह पर प्रतिवेदन

राजभाषा कार्यान्वयन समिति की 29-7-08 को सम्पन्न हुई बैठक में लिए गए निर्णय अनुसार हिन्दी पखवाड़ा के आयोजन हेतु उप समिति गठित की गई जिसमें निम्न सदस्य थे।

श्री बी.वी. रामकुमार  
श्री एन.सी. श्रीनिवास  
श्रीमति के. नागरानी  
श्री महेश चौधरी

उप समिति ने 9 सितम्बर, 2008 को बैठक का आयोजन किया और हिन्दी पखवाड़े के आयोजन के लिए उप समिति ने विभिन्न सिफारिश की। इन सिफारिशों का सक्षम प्राधिकार से अनुमोदन मिलने पर 15-30 सितम्बर, 08 तक हिन्दी पखवाड़ा मनाया गया। इस पखवाड़े के दौरान सभी विभागध्यक्षों से अनुरोध किया गया कि जहां तक संभव हो हिन्दी में टिप्पणी व पत्र भेजें। इसके अलावा हिन्दी में किए गए कार्य संबंधी विवरण नोटिस बोर्ड पर लगाया गया। हिन्दी पोस्टरों का प्रदर्शन किया गया। सक्षम प्राधिकार द्वारा दी गई अनुमति के अनुसार 15 सितम्बर, 2008 को हिन्दी दिवस के शुभअवसर पर हिन्दी पखवाड़ा का



शुभआरंभ किया गया। इस संदर्भ में अधिकारी व कर्मचारियों से अनुरोध किया गया कि हिन्दी में अधिक से अधिक कार्य करें और पतियोगिताओं में भाग लें। इस पखवाड़े के दौरान हिन्दी को पोन्नति एव सभी अधिकारी / कर्मचारी एव विद्यार्थियों में हिन्दी के पति रुचि बढ़ाने के लिए निम्नलिखित पतियोगिताएँ, सभी अधिकारी व कर्मचारी सदस्यों को, कुछ पतियोगिताएँ विद्यार्थियों एवं गेस्ट फैकल्टी के लिए भी आयोजन करने का निर्णय लिया गया। पतियोगिताएँ हिन्दी मातृभाषा वाले सहभागियों के लिए और अहिन्दी मातृभाषाओं वाले सहभागियों के लिए अलग-अलग आयोजित की गई।

क. पतियोगिता का नाम	सहभागी	समन्वयक
1. कविता लेखन	सभी अधिकारी व कर्मचारी सदस्य, विद्यार्थी, गेस्ट फैकल्टी	श्री के. रविकुमार
2. नारे लेखन	उप.	श्रीमति निर्बिंदा पटायक
3. निबंध लेखन	उप.	सुश्री बीनापानी महापात्र
4. वाद विवाद / विचार विमर्श	उप.	श्री एन.सी.श्रीनिवास
5. टंकण पतियोगिता	केवल अअधिकारी व कर्मचारियों के लिए	श्रीमति के. नागरानी
6. टिप्पण व आलेखन	उप.	श्री ए.वैकटेश्वर राव
7. प्रश्न मंच पतियोगिता	सभी अधिकारी व कर्मचारी सदस्य, विद्यार्थी, गेस्ट फैकल्टी	डॉ.विजयलक्ष्मी मैरेडू

एन.आई.एम.एच. की रजत जयंती वर्ष के अवसर पर हिन्दी पतियोगिताएँ विशेष बच्चों के लिए भी आयोजित करने का निर्णय लिया गया। तदनुसार निम्नोक्त पतियोगिता विशेष बच्चों के लिए आयोजित की जाए।

राईस / गीत एवम् कहानी / कविता	विशेष स्कूल के विशेष बच्चों के लिए	श्रीमति वी.आर.पी शैलजा राव
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उपरोक्त पतियोगिताओं के विजेताओं को 30 सितम्बर, 08 को आयोजित विशेष समारोह के दौरान पुरस्कार प्रदान किए गए। इस विशेष समारोह के अवसर पर मुख्य अतिथि के रूप में श्री नारायण चावला, जिला व सैसन जज (रिटायर्ड) उपस्थित हुए। मुख्य अतिथि तथा निदेशक ने हिन्दी में अधिक से अधिक कार्य करने के लिए आवश्यक मार्गदर्शन दिया।





## Exhibitions and Public Awareness Camps

NIMH has conducted exhibition cum awareness campaign and disability camps in various parts of the country. The objectives of this programme are to create an awareness on disability among the general public, assessment and referral of persons with disability, various schemes and benefits available for persons with disability providing disability certificates and aids and appliances to persons with mental retardation. The details of the programmes conducted are given below:

Sl. No.	Name of the programme/ Exhibition	Venue	Duration		Organizer
			From	To	
1.	Ability Mela	Institute of Engineers, Khairatabad	25.04.08	27.04.08	LSN foundation & BCF, New Delhi
2.	Mundeshwari Dham Mela	Mundeshwari Dham	10.04.08	13.04.08	Ministry of Social Justice & Empowerment, Govt.of India
3.	Kochas, Exhibition cum Awareness Campaign Mela	Kochas, Rohtas Dist.	08.05.08	11.05.08	Ministry of Social Justice & Empowerment, Govt.of India
4.	Tilouthu, Exhibition-cum-Awareness Campaign	Tilouthu, Rohtas Dist.	22.05.08	25.05.08	Ministry of Social Justice & Empowerment, Govt.of India
5.	Kharigaon Exhibition-cum-Awareness Campaign	Kharigaon, Rohtas Dist.	21.06.08	23.06.08	Ministry of Social Justice & Empowerment, Govt.of India
6.	Exhibition-cum- Awareness Campaign at Bhopal	Bhopal	18.07.08	20.07.08	Ministry of Social Justice & Empowerment, Govt.of India
7.	Exhibition-cum-Awareness Campaign, at Chennai	Chennai	27.08.08	29.08.08	Ministry of Social Justice & Empowerment, Govt.of India
8.	Exhibition-cum-Awareness Campaign at Jaipur	Jaipur	05.09.08	07.09.08	Ministry of Social Justice & Empowerment, Govt.of India
9.	Exhibition-cum-Awareness Campaign at Karagahar	Karagahar	12.10.08	15.10.08	Ministry of Social Justice & Empowerment, Govt.of India





## News from Regional Centers

### Training programme on Management of Children with Cerebral Palsy

Training programme on “Management of Children with Cerebral Palsy” was conducted during 13-17 October, 2008 at RC-Delhi. Eight professionals attended the programme. The programme was coordinated by Mrs.Vijay Bahl. The participants were exposed on assessment, techniques and management of children with cerebral palsy.

### Training programme on Communication Impairment and its Management

A training programme on “Communication Impairment and its Management” was conducted during 3-7 November, 2008 at RC-Delhi. Two professionals attended the programme. The programme was coordinated by Mrs.Nila Gupta. The participants were exposed techniques and

management of communication impairment in children with mental retardation.

### Training programme on Development of Creativity

A training programme on “Development of Creativity” was conducted during 24-28 November, 2008 at MSEC New Delhi. Seven professionals attended the programme. The programme was coordinated by Mrs.Archana Prabhakar.

### CRE programmes on Specific Learning Disability

Two CRE programmes on “Specific learning disability” was conducted during 3-21 November 2008 at Belapur, Mumbai. Fifty nine professionals attended the programme. The programme was coordinated by Ms. Pranitha Madkaikar.





## News from NGOs

### **ANKUR Special School for Mentally Retarded Children, Bhavnagar**

The institute has compiled and published two folders in Gujarati for the benefit of parents of children with mental retardation, teachers and general public. The folders are:

- Behavioural problems of mentally retarded children compiled by Reshma Shah, MA (Psychology), DSE and B.Ed (MR)
- ANKUR' vocational training center for mentally handicapped camp, Naynaben Navadiya (B.A) and Meena Rupera (B.Com, TTNC.)

These folders are freely available for those who need. You may right a letter requesting the honorable secretary, ANKUR special school for the mentally retarded school, plot no.1945, Sardar Nagar circle, Bhavnagar – 36402.

### **'MANASA'**

### **Rehabilitation and Training Center, Post Box No.26, Shirva post, Udupi taluk and District – 574116**

The center has installed satellite downlink facility for viewing programmes transmitted by RCI on disability. With this facility the center is in a better position to equip itself with latest information on techniques and knowledge for handling children with special needs

### **DAKSHINYA Institute for the Mentally Handicapped, Guntur**

#### **CRE Programme**

A five day training to rehabilitation professionals and special educators was conducted at Dakshinya by

Rehabilitation Council of India (RCI), under "Continuing Rehabilitation Education(CRE)". About 40 teachers from various primary schools attended the training programme.



### **Training to Primary School Teachers**

A training program with "Inclusive and learning friendly environment" (ILFE) in school education as the theme was conducted from 8<sup>th</sup> to 12 November 2008 by Sarva Siksha Abhiyan, Govt.of A.P. at Dakshinya in association with "Save the Children"(B.R.B).

About 80 primary school teachers from Mangalgiri and Guntur rural mandals in two batches were trained on UNESCO Toolkit on ILFE (Telugu Version).

### **Child Rights Week**

The Child Rights Week was celebrated by the "Save the Children – BRB" from 14-20 November 2008 at Dakshinya, Guntur. 20<sup>th</sup> November is a very special day for the mentally challenged children of Dakshinya. On the day International ING Foundation celebrated their state level child rights day at Dakshinya with great enthusiasm and fanfare. Dr.T.V.Rao, Founder & Chairman Dakshinya presided over the meeting, the



District Judge assured to provided employment opportunities to the eligible mentally challenged, as per the Government norms.

## Children's Day

On 14<sup>th</sup> November the Children's Day was celebrated to mark the birth anniversary of the first Prime Minister Pt.Jawaharlal Nehru. Throughout the week, awareness camps were organized at different rural places and urban slums like Netaji Nagar, Reddipalem, Vaddavari palem, Chinnakakani etc. The local community leaders, teachers, children, parents and anganwadi workers etc tookpart in the camps.



## Nirmala Charitable Trust, Calicut

Nirmala charitable trust, Calicut is running early intervention centers at Calicat/ Manjeri and Kannur.

## KVM College of Special Education

The K V M College of Special Education was established in the year 2001 by the K V M Trust, Cherthala, Kerala. This college was started with recognition of the Rehabilitation Council of India (RCI) and affiliation to the National Institute for the Mentally Handicapped (NIMH), Hyderabad. Human Resource Development in the area of Special Education and disability rehabilitation remains the major objective of the college.

As the college is located in a rural area (Cherthala) it has paved way for many youth, particularly women, to join a professional course with guaranteed job opportunity. The college is directly empowering the young women of this community personally, specially, emotionally and vocationally. Many teacher trainee candidates are from the fishermen community and from other categories that come under the low socio-economic status. Though self-financing, the K V M Trust actively considers relations in the fee structure as and when needed.

## Training Programs

The College of Special Education is offering the following Courses.

01. Diploma in Education Special Education (Mental Retardation)
02. Diploma in Education Special Education (Autism spectrum Disorder)
03. Diploma in Early Childhood Special Education (Mental Retardation)
04. B.Ed Spl.(MR)
05. B.Ed.SE.DE(MR) by Bhoj University
06. PGPDSE BY Bhoj University.

The result of the Diploma courses was published in the month of July and we achieved a hundred percent result. (In Diploma in Special Education (MR) there were 9 distinctions and 11 first classes. In Diploma in Special Education (ASD) 14 students appeared for the examination and we obtained 100% result. Out of 14, there were six distinctions and eight first classes. All the outgoing students were placed in different special schools.



## **Award Received by the College**

The college was accredited with “very Good Performance in the field of Mental Retardation” by Assessment & Accreditation team of RCI. An award has been extended in this regard to the College by RCI

## **Jeevoday Special School for the Mentally Handicapped**

### **Twenty -20 Challenge Cup – 2008 Won by Jeevoday Special Scool at Chandigarh.**

*“Let me win, but if I cannot win let me be brave in the attempt”*

With this motto in mind Jeevoday Special School for the mentally challenged has always been striving hard with their special abilities in sports. Jeevoday special school participated in twenty-20 challenge cup-2008 cricket series with Chandigarh team from 27<sup>th</sup> November to 3<sup>rd</sup> December 2008 organized by National Cricket Association at Chandigarh. Tournament was declared open by the Governor of Punjab Shri S.F.Rodrigus on the opening match.

In the first match Chandigarh won the toss elected to field first. Maharashtra team scored 134 all out in 18 overs. Chandigarh team failed to chase the total and were all out with only 63 runs on the board. Ismail Sheikh of Jeevoday got the man of the match award for his 34 runs and 2 wickets. In second match

Jeevoday school batted first and scored 187 for 7 wickets in allotted 20 overs. Chandigarh team failed to chase the target and were all out for 92 runs with 3 overs still left. Mazhar Khan was the highest scorer with 28 runs and took 3 wickets.

In third match Chandigarh team batted first and scored 141 runs at the loss of 9 wickets in their allotted 20 overs. Maharashtra team lost the match with only 109 runs all out. And in fourth match Jeevoday team batted first and could score only 102 runs all out. Chandigarh team won this match by successfully chasing the target in just 18 overs with one wicket.

In the last match of the series Jeevoday special school won the toss and decided to field first. Chandigarh team scored 143 runs at the loss of 9 wickets. Jeevoday school won the match chasing the target successfully in 8.3 overs losing 7 wickets. Ravindra Pagne scored 33 runs and took one wicket. Thus in five matches series Jeevoday school won the series by three/two win and Mazhar Khan was adjudged the man of the series award. Prizes were given away by Shri Yograj Singh father of Yuvaraj Singh the Indian National Team player.

Mr. Madhav Zode District Social Welfare Officer, Zilla Parishad, Nagpur personally congratulated the principal, coaches and players of Jeevoday special school for this laurel to the city and state of Maharashtra.





# Sharing Experiences

## कोसी का प्रकोप और हमारा सफर

मोहम्मद मशहूद अली  
M.Ed. Spl.Edu. (MR)

एक ही ढर्रे पर तेज रफतार से भागती दौड़ती जिन्दगी कभी - कभी रूक सी जाती है, फिर एक नए रास्ते पर चलने लगती है। ऐसा ही कुछ मेरे साथ उस दिन 02 सितम्बर, 2008 को हुआ जब अपने ही संस्थान, एन.आई.एम.एच. के बिहार बाढ़ राहत सेवा दल में मुझे नामांकित किया गया।

आगे बढ़ने से पहले मैं कोसी नदी, बाँध और बिहार बाढ़ ग्रस्त इलाके की जानकारियाँ लेना चाहता था। वही जानकारियाँ मैं आगे बाँट रहा हूँ :-

कोसी बिहार की सबसे जीवत नदी है, यह हिमालय पर्वत माला से अपनी यात्रा शुरू करके नेपाल और तिब्बत के रास्ते भारत में पहुँचती है। इस नदी का कुल जल ग्रहण क्षेत्र 74.030 वर्ग कि.मी. जिकी मात्रा 11.410 वर्ग कि.मी. भारत में और बाकी एक बड़ा हिस्सा 62.620 वर्ग कि.मी. नेपाल और तिब्बत में है।

क्योंकि इस नदी का निचला जल ग्रहण क्षेत्र भारत में पड़ता है, इसलिए नेपाल के जल ग्रहण क्षेत्र के बाढ़ 1960 ई. में एक तटबंध बनाया गया। इसके रख-रखाव के लिए भारत सरकार शत-प्रतिशत अनुदान देती रही है। यही कारण है कि वर्ष 1985 में 700000 Qs जल छोड़ने पर बाँध भी नहीं टूटा पर इस वर्ष केवल 177000 Qs जल छोड़ने पर ही बाँध टूट गया। अब यह नदी बाँध के दूसरी तरफ समानान्तर नदी बनकर बह रही है। जिससे बिहार के 6 जिले बुरी तरह प्रभावित है (सहरसा, सुपौल, पूर्णिया, मधुपुरा, अररिया और कटिहार)। बिहार की स्थिति से आपको रुबरू कराने से पहले मैं फिर अपने एन.आई.एम.एच. से बात को आगे बढ़ाना चाहता हूँ :-

दिनांक 2 सितम्बर, 2008 के दिन 5 बजे निदेशक महोदय ने बैठक बुलाई। इस बैठक में हमें बाढ़ की तीव्रता की जानकारी देते हुए राहत

दल के सदस्यों को सफर की तैयारी के निर्देश दिये। 5 सितम्बर, 2008 के सुबह सभी सदस्य सुश्री बीनापानी महापत्रा, डॉ. जार्ज रेड्डी, श्री सुधीर भाले संकाय अधिकारी, दीपित कांत, गीता, मनोज, विष्णु, रामननाथ, श्रेया गीताका, रुची और मैं अली, एन.आई.एम.एच. स्वागत कक्ष पर मिले और हमने सफर की शुरुआत की।

रेल में हमें वक्सीनेशन दिया गया और हमने आगे आने वाले दिनों की रूप रेखा तैयार की यह सफर 51 घंटे का था।

हम 4 सितम्बर के दिन 1.00 बजे दोपहर में सहरसा पहुँचे। स्टेशन पर काफी भीड़ थी, ट्रेनों में भी लोग भरे पड़े थे। ट्रेन यात्रियों के लिए फ्रिं कर दी गई थी। स्टेशन को देख कर ही वहाँ की स्थिति का अंदाजा हो रहा था। हमने वहाँ के जिलाधिकारी और सिविल सर्जन से मुलाकात की और उनके निर्देशानुसार दूसरे दिन सेवा यात्रा की शुरुआत की, दूर-दूर तक जल और किनारे पर जिन्दगी को बचाने के लिए जुझते लोग और उनकी परेशानियों से हम रुबरू हुए।

हमने कई जगहों पर टूटे पेड़ देखे वे कभी लोगों को छाया और फल दिया करते थे, कोसी के क्रोध से जमीन पर ढेर हो चुके थे। बाढ़ की तीव्रता का पता कटी हुई सड़कों और जल में विलीन हो गई खेतों के मंजर से साफ पता चल रहा था।

रास्ते में हमारी मुलाकात 35 वर्षीय किसान रामकुमार से हुई। वो काफी व्यथित दुखी था, हमारे पूछने पर उसने बताया उसकी जीविका का श्रोत उसके खेत अब नदी बन चुकी है। सारी मेहनत पर पानी फिर चुका है। यह दास्ताँ सिर्फ एक राम की नहीं बल्कि ऐसे ही हजारों व लाखों किसानों की थी।

पत्थर घाट का मंजर कुछ और ही था। काफी लोग बेघर हो चुके थे। उनके घर पानी से भर चुके थे। उनकी इस विषम परिस्थिति को



देखकर हमनें उन्हे सुरक्षित स्थान पर जाने का सुझाव दिया तो उन सबों ने एक स्वर में हमें जबाब दिया:

“कोसी माँ ने हमें अब तक जीवन दिया है, अगर वो हमारे जान लेना चाहती है, तो हम तैयार है” ।

कई जगहों पर हमने भूख से बिलखते बच्चों को देखा, उन्हें खाने पीने के लिए कुछ नहीं मिल रहा था । हमें एक बार सहरसा के एक कार्यालय में जाने का मौका मिला, वहां देश-विदेश से जो बाढ़ पीड़ितों के लिए दवाईयाँ और अनाज सामग्री आई थी हमने देखी । वो सभी सड़ रही थी, बस कमी थी तो उन सामग्री को प्रभावित लोगों तक पहुँचाने वालो की । तब हमें महसूस हुआ कि यहाँ काम करने के लिए पढे-लिखें लोगों की नहीं बल्कि सच्चे मन से काम करने वालों की जरूरत है ।

इन सभी हालातों को देखते हुए हमारे दल ने निश्चय किया कि कितनी भी मुश्किल आए हम वहाँ सेवाएँ देंगे जहाँ-जहाँ इसकी जरूरत हैं । फलतः हमने जगह-जगह यथासम्भव चिकित्सकिय और मनोवैज्ञानिक सहायताएँ दी । विभिन्न कैम्पों के भ्रमण के दौरान हम 80 फुट गहरे पानी में नाव, स्टीमर, साइकिल, रिक्शा, ऑटो, जीप, बस, टांगा और कई-कई कि. मीटर की दूरी पैदल ही तय की ।

कैम्पों में हमने देखा की काफी लोग बाढ़ जनित बीमारियों से पीड़ित थे। हमारे दल ने इन सभी प्रभावित लोगों की चिकित्सकिय सहायता दी, और हमने देखा कि लोग काफी निराश, क्रोधित और मानसिक दबाव से परेशान थे । इन सबका हल हमारे दल ने उन्हें मनोवैज्ञानिक परामर्श देकर किया ।

वहाँ हम दो शारिरिक रूप से अक्षम लोगों से मिलें । हमने एन.आई.ओ.एच. के श्री पलित जी को इसकी सूचना दी, फलत उन लोगों को अगले दिल वैशाखी और अन्य उपकरण मिले । बाद में श्री पलित जी ने ही बताया की वो सभी उपकरण पाकर अभिभूत थे ।

हमारे दल के द्वारा दी गई चिकित्सकिय सहायता और मनोवैज्ञानिक परामर्श का ब्यौरा निम्नलिखित है ।

क्रं. स.	स्थान	चिकित्सकिय सहायता	मनोवैज्ञानिक परामर्श	कुल संख्या
1	मदरसा सौर बाजार	247	368	615
2	उत्तराखण्ड कैम्प पंचायत	252	207	459
3	जमेरा पत्थर घाट	233	360	593
4	मधेपुरा काँप	168	255	423
5	कांप बाजार	318	370	688
	कुल संख्या	1218	1560	2778

जब वापसी के लिए हम सहरसा स्टेशनप पहुँचे तो हम सभी के चेहरों पर थकान साफ महसूस हो रही थी, पर साथ ही मिशन की कामयाबी की सुशी भी साफ नजर आ रही थी ।

हमारा दल सही सलामत दिनांक 14 सितम्बर, 2008 को सिकन्दराबाद पहुँचा । दूसरे दिन हमने एन.आई.एम.एच. में रिपोर्ट प्रस्तुत की, हमने कुछ सुझाव भी दिए । संतोषजनक बात यह है कि उन रिपोर्टों और सुझावों को ध्यान में रखकर एन.आई.एम.एच. की दूसरी राहत टीम सहरसा पहुँची ।

इस सफर से हमें यह सीख मिली की जिन्दगी नाम है - एक दूसरे की मदद करने का पता नहीं अगले लम्हें हम रहे या न रहे । किसी “कोसी” या “मूसी” का शिकार हम भी बन सकते हैं । रिपोर्ट का समापन मैं इन चन्द पंक्तियों से चाहता हूँ ।

हो अखण्ड शक्ति तन में,  
नव चेतना हो मन में--  
समृद्धि के आवाहन में ।

साकार स्वप्न करदें,  
आधार वो बनाएँ--  
हो स्नेह, शिखा जिसकी  
हम वो दिया जलाएँ ....

- मोहम्मद मशहूद अली  
विशेष शिक्षा विभाग  
एम.एड. विद्यार्थी





# NIMH Library - Recent Additions

Author	Title/Name of the Publisher	Net Price(Rs.)
JACOBSON, J.W.	Handbook of intellectual and developmental disabilities London: Springer, 2007. ....	Rs. 4138/-
SINGH, K.V	National policy an education and literacy in India. N.D:Vista, 2007. ....	Rs. 760/-
ASSOCHAM	Corporate social responsibility towards a sustainable futurte. N.D: Assocham, 2008. ....	Rs. 1060/-
SCHERER	Assistive technology: matching device and consumer for successful rehabili Washington: APA, 2002. ....	Rs. 919/-
GOODHEART, C.D.	Evidence – based psycho therapy where practice and research meet. Washington: APA, 2006. ....	Rs. 2303/-
VANDENBOS, G.R.	APA dictionary of psychology. Washington: APA, 2007. ....	Rs. 2303/-
SNYDER	Clinical neuropsychology. 2/edn. Washington: APA, 2006. ....	Rs. 1919/-
RISO, L.P.	Cognitive schemas and care beliefs in psychological problems. Washington: APA, 2007. ....	Rs. 2303/-
FRANK, R.G.	Handbook of rehabilitation psychology. Washington: APA, 2000. ....	Rs. 2303/-
EVERLY, G.S.	Personality – guided therapy for post traumatic stress disorder. Washington: APA, 2004. ....	Rs. 2303/-
BEUTLER, L.E.	Rethinking the DSM: A psychology perspective. Washington: APA, 2002. ....	Rs. 1535/-
BOLL, T.J.	Handbook of clinical health psychology.(VOL. I,II,III) Washington: APA, 2002 (Cost. 2687/-X3).....	Rs. 2687/-
SCHROEDER, S.R.	Self injurious behaviour gene-brain be having relationship. Washington: APA, 2002. ....	Rs. 1924/-
ESSTROM, R.B.	Assessing individuals with disabilities. Washington: APA, 2004. ....	Rs. 1346/-
GATCHEL, R.J.	Clinical health psychology & primary care. Washington: APA, 2003. ....	Rs. 1924/-



<b>Author</b>	<b>Title/Name of the Publisher</b>	<b>Net Price(Rs.)</b>
JACOBSON, J.W.	Manual of diagnosis and professional practice in mental retardation. Washington: APA, 1996. ....	Rs. 961/-
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BAROFF, G.S.	Mental retardation : nature cause and management. 3/edn. London: Routledge, 1999. ....	Rs. 2114/-
MAHAPATRA, B.	Due of reinforcement on writing skill of child effect of self instructional material on learning. SECUNDERABAD: NIMH, 2008. ....	Gratis
SATYANARAYAN RAO, P.	Basic mathematical symbols among students & NIOS effect of multi-sensory approach in learning to read words. SECUNDERABAD: NIMH, 2008. ....	Gratis
ANIL KUMAR CHAUBE	Among the children with mild mental retardation primary level effect of structured teaching on social and communication. SECUNDERABAD: NIMH, 2008. ....	Gratis
SWAPNA.V. THUMBI	Skills of students with autism primary level effect of play-way method on learning numerical place value. SECUNDERABAD: NIMH, 2008. ....	Gratis
GANESH SHEREGAR	Among students with mild mental retardation effect of multi sensory approach in developing reading skills. SECUNDERABAD: NIMH, 2008. ....	Gratis
KAMLA LAKXHMI, C. SANAM, M.K.	Among persons with mild mental retardation and learning disabilities. SECUNDERABAD: NIMH, 2008. .... Picture prompting Vs video prompting on acquisition and maintenance of cooking skills among students. SECUNDERABAD: NIMH, 2008. ....	Gratis Gratis
JANWADKAR MAHADEV	Effect of parenting styles on self-regulatory habits amongst pre-adolescents with mild mental retardation. SECUNDERABAD: NIMH, 2008. ....	Gratis
RENU UPPAL	Effects of domestic skill training on social behavior adolescent students with moderate mental retardation. SECUNDERABAD: NIMH, 2008. ....	Gratis



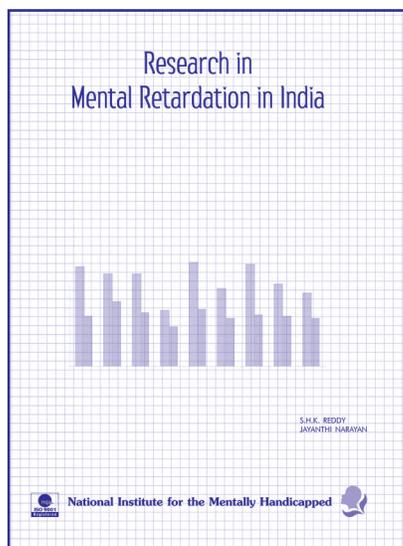
<b>Author</b>	<b>Title/Name of the Publisher</b>	<b>Net Price(Rs.)</b>
KAVITHA	The effect optimally involvement training on rectify pre-academic concept formation in the pre-school children with mental retardation. SECUNDERABAD: NIMH, 2008. ....	Gratis
LAKSHMI, S.S.	Effect of error analysis and error correction in the Development of writing skills among the child with Mental retardation. SECUNDERABAD: NIMH, 2008. ....	Gratis
SHEENA, K.V.	Effect of vocational education on developing functional Academics among students with mild mental retardation. SECUNDERABAD: NIMH, 2008. ....	Gratis
ALAKANANDA BANDYOPADHYAY	Effectiveness of computer assisted instructions on the academic performance of children with mild mental retardation at primary level SECUNDERABAD: NIMH, 2008. ....	Gratis
JITENDRA RAM	Analysis of parental views on integrated school for children with mental retardation. SECUNDERABAD: NIMH, 2008. ....	Gratis
AKHILESH KUMAR	Effect of peer tutoring on achievement of among children with mental retardation at primary level. SECUNDERABAD: NIMH, 2008. ....	Gratis
SUVARNA BAI, A.	Effect of specific in – door games o memory of primary level children with mild mental retardation. SECUNDERABAD: NIMH, 2008. ....	Gratis
VINEETHA, P.V.	Comparision of effectiveness of same age and peer tutoring on developing social and communication skills in primary mental retardation. SECUNDERABAD: NIMH, 2008. ....	Gratis
KATARIA, SUMIT	Effect of programmed instruction on pre-arithmetic skills amongst primary students with mild mental retardation. SECUNDERABAD: NIMH, 2008. ....	Gratis
PINKU KUNDU VIJAY KUMAR,K. NAVEEN	Effect of yoga on attention of children with mental retardation at secondary level. SECUNDERABAD: NIMH, 2008. .... An analysis of the views of teachers and children with average intelligence towards integrated setting. SECUNDERABAD: NIMH, 2008. ....	Gratis Gratis



<b>Author</b>	<b>Title/Name of the Publisher</b>	<b>Net Price(Rs.)</b>
RAVINDER, T.	Effects of reinforcement on learning self – help skills amongst pre-school children with mental retardation. SECUNDERABAD: NIMH, 2008. ....	Gratis
NARESH KUMAR,G	Effect of play way method on learning colour concept among children with mental retardation at primary level. SECUNDERABAD: NIMH, 2008. ....	Gratis
UMESH KUMAR SHARAMA, B.	To study the effects of PECS on communication amongst pre-adolescent with autism spectrum – disorder . SECUNDERABAD: NIMH, 2008. ....	Gratis
RAKESH RANJAN	The awareness level of schemes and benefit among the parents of children with disabilities. SECUNDERABAD: NIMH, 2007. ....	Gratis
SABHA,S.	Personality pattern of mothers of children with disabilities. SECUNDERABAD: NIMH, 2007. ....	Gratis
RACHANA MAURYA	Comparative study on the family support self-esteem among urban and rural parents having children with mental Retardation. SECUNDERABAD: NIMH, 2007. ....	Gratis
TANNU, GERA.	Effects of cognitive intervention on sustained attention in children with learning disability having attention deficits. SECUNDERABAD: NIMH, 2007. ....	Gratis
DATTATREYA RAI	A study on marital quality of parents of children with Mental retardation. SECUNDERABAD: NIMH, 2007. ....	Gratis
VISHAL ANIL RAO, G.	Self –esteem and job satisfaction among women employees with disability in information technology sector SECUNDERABAD: NIMH, 2007. ....	Gratis
PRASHANT, V.M.	Personality pattern of professionals working in the field of disability rehabilitation SECUNDERABAD: NIMH, 2007. ....	Gratis



# NIMH Publications



## Research in Mental Retardation in India

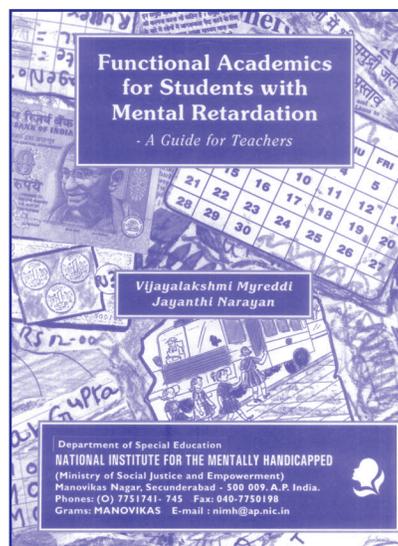
The authors have made an effort to compile the research articles in the field of mental retardation about 1180 articles have been compiled in this book. The collected articles are classified under medical, psychological, special educational, psychosocial, rehabilitation, prevention – early intervention, historical, organizational, legal and technological aspects. Further, the articles which are on general aspects of mental retardation and not belonging to a specific category are classified as general aspects. In addition, journal articles, thesis/ dissertations and conference papers have also been included in the compilation. This book will be useful for the research scholars and for the professionals who intend to take up research in the field of mental retardation.

*Languages : English*

*Cost : Rs. 245/-*

*Author : S.H.K. Reddy, Jayanthi Narayan*

*No. of pages : 410*



## Functional Academics for Students with Mental Retardation - A Guide for Teachers (1998)

Curriculum followed in educational programmes for individuals with mental retardation is different from other groups of individuals with disabilities due to the nature of disability. As their capacity to acquire, maintain and to generalize learned skills is minimum, a regular school system of teaching a prescribed syllabus in the classroom may not be useful. The students with mental retardation need more functional and activity based curriculum, which prepares them for independent living. Therefore, functional academics become an essential core area of curriculum for children with mental retardation, which facilitates independent living. Keeping in view the educational needs of persons with mental retardation, an attempt is made to write a book on "Functional Academics" to serve as a guide to teachers. This book is the first of its kind in the country in the area of teaching functional academics. The contents of the book include three chapters. Chapter one is on functional reading and writing, Chapter two is on functional mathematics and Chapter three is on mathematical applications.

Though the book is written for teachers, it is useful for all the professionals and parents who are dealing with persons with mental retardation. Further, the book may be used by personnel working in non-formal education settings advocating functional literacy.

*Languages : English, Tamil, Telugu, Malayalam, Hindi, Assamese, Bengali, Manipuri, Mizo, Khasi, Garo, AO (Tribal), Nagamese,*  
*Cost : Rs. 42/- No. of pages : 130*

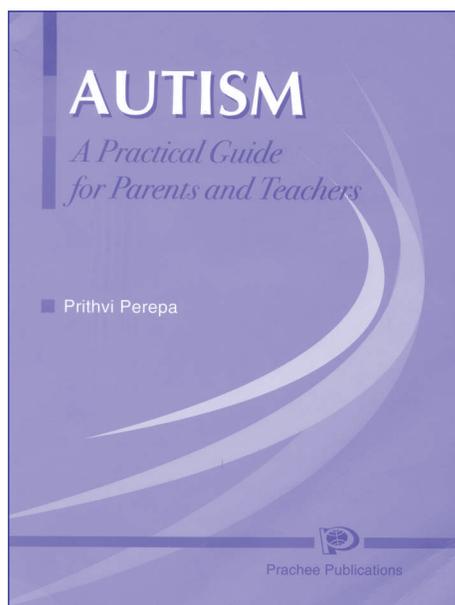
*ISBN 81-86594-12-4*

*Authors : Vijayalakshmi Myreddi, Jayanthi Narayan*



## Book Review

Book title : 'Autism: A Practical Guide for Parents and Teachers'  
Author : Prithvi Perepa  
Publisher : Prachee Publications, Hyderabad  
Year : February, 2007  
Price : Rs.200.00



Autism is increasingly being recognized as the greatest tragedy of contemporary times. In the contemporary information age, it has earned a sobriquet as 'Greek Syndrome'. The formal baptism of 'Early Infantile Autism' occurred in 1943 by Leo Kanner. Thereafter, it has earned several names. It is possible that unidentified afflicted cases existed at all ages in all societies and at all times. There is growing impression that this disorder is not being diagnosed more than ever before.

Is there a genuine rise in numbers of these children? Or is it the growing penchant of contemporary diagnosticians to overuse a newfound terminology? Some authors attribute the rise in these cases to the changed culture of contemporary times-wherein

premium on spontaneous social interactions and interpersonal relationships, parent child indulgences, group affinities, and wealth of parenting skills are on the wane.

The recognizing characteristics of autism are ambiguous. Different authors propose different constellation of clinical signs and symptoms to identify this condition. At times, some of its features appear in children as part of some other disorders, disabilities or diseases. Professionals are equally uncertain on the causes of this disorder. Various biological, genetic, hormonal, metabolic, immunological, familial, cultural, constitutional, neurological, social, and an endless host of other causes are speculated and littered in the literature on autism-without any unfailing authority. The result is that parents and caregivers of these children are perplexed and confused. They grope in dark for advice on the subject.

The arena of therapeutic management for these kids is equally mind boggling and bewildering. A range of therapies/ solutions are offered as panacea: CFGF or special diets, zeolites, equestrian therapies, aroma therapy, chelation, music therapy, light sound therapy and so on. The list is endless. Depsite all this, many parents are left to fend for themselves on day to day issues related to rearing and caring of their children assumed to be autism. Others cling to any piece of advice from all and sundry-reeled out with best intentions but no proven efficacy. There are very few professional writings on the subject. Much is hearsay or guised in attractive packages with little in proven content. Under these dismal circumstances, this book emerges refreshingly as lone lamp post in a dark continent of ignorance about kids with autism.

The book is divided into convenient eleven reading sections beginning with introduction, diagnosis and assessment, family issues, learning styles and theories, communication and social skills, imagination, play



and life skills, visual strategies, identifying and management of challenging behaviours respectively. Each chapter is sprinkled with interesting case vignettes to illustrate key points. Admittedly, the author proposes to avoid theories and dwell only on practical application of techniques for handling children with autism-even though this promise is held with occasional breach. The language and style of narration is simple. The use of jargon is minimized though not eliminated. An impressive beginning is made with a glossary even though all the difficult terms do not find place in it.

The tilt of the write-up is typically the urban elite and educated reader even as the author attempts to tight rope walk between addressing professionals, teachers and ordinary parents of children with autism. A few pages are impressively down-to-earth and pregnant with practical suggestions, while others dwell on

theoretical details. A professional reader seeking to check for the references would be disappointed not to find them at the end of the book. Illustrations are simple and attractive in most pages though not in visible size in some places.

On the whole, the book is a needed publication. It will serve as eye-opener for the uninitiated parent, study book for the starting professional and refresher for the experts in their dealings with kids diagnosed on the autism spectrum in our country.

**Dr.S.Venkatesan**

Professor and Head

Department of Clinical Psychology

All India Institute of Speech and Hearing

Manasagangotri, Mysore:570006

Email: psycon\_india@yahoo.co.in



## **RETIREMENT**

**Dr. SAROJ ARYA**

Associate Professor, Rehabilitation Psychology

Retired on 30.04.2007

The institute places on the record of appreciation for her contributions during her period of service.



# New Organizations

List of new organizations to be included in NIMH Newsletter December 2008  
(questionnaires received during July 2006 to December 2008)

Sl. No.	Name of the Orgn.	Address	State	Age Range (Years)	Type of Institution	Nature of services
1	Annamma School for Hearing & Physically Handicapped & Baby care Centre	Opp. Police Quarters, V.T.P.S. Road, Ibrahimpatnam, Krishna Distt: 521 456	Andhra Pradesh	above 3	resi, pre voc trg, day care, voc trg, hbt	pt, sp&a, pc, psych, med, educ
2	Nima Vikalang Sewa Sanstha	(Run by Late Daulatbhai Desai Mentally Retarded Boys School) Rajapeth Amravati - 444606	Maharashtra	6 to 18	day care	pt, pc, psych, ot, med, educ.
3	Sahakari Avas Pradyog (SAP)	At: Goudasahi, P.O. Mashra, Distt: Jajpur - 755012	Orissa	3 to 25	resi, pre voc trg, voc trg	educ.
4	Sahyog India	Prerna Institute of Rehabilitation & Research, 3/56/A, Daulat Bhawan, R.S.Pura, Jammu - 181 102	Jammu & Kashmir	All	resi, pre-voc trg, day care, hbt	pt, pc, psych, ot, educ.
5	Sambal (Training & Rehabilitation Institute for Mentally Handicapped Children)	Kalyanam Karoti, Kalyan Dham, Masani -Delhi Road, Mathura	Uttar Pradesh	3 to 18	pre voc trg, day-care, hbt	pt,sp&a,pc, psych,med, educ,
6	Sambhavana	Malti Bhawan, Bhartinagar, Ward No 15, Saharsa - 852201	Bihar	6 to 35	resi, shelt ws, day -care, voc trg, hbt	pt,sp&a,pc, psych,ot, med,educ, eis
7	Sankalp	Naval Spe School, Special Education Centre, Navy Wives Welfare Association, Near Navy Children School, Vizg - 530005	Andhra Pradesh	5 to 19	day care	pt, sp&a, ot, educ.



Sl. No.	Name of the Orgn.	Address	State	Age Range (Years)	Type of Institution	Nature of services
8	Sankalpam MR School	Pedda Veedhi, Balajipeta Mandal & Post, Vizianagaram - 535557	Andhra Pradesh	5 to 15	day-care, hbt	pc, educ
9	Sanvedana Cerebral Palsy Vikasan Kendra	Vivekand Vaidyaki Pratistan & Research Centre, Plot No.55, M.I.D.C.Latur- 413531	Maharastra	3 to 11	day-care	pt, pc, med, educ
10	Sapthagiri Special School for the Mentally Retarded Children	121/44, Ramamoorthi Road, Opp. Water Tank, Virudhunagar - 626001	Tamilnadu	4 to 10	day care	pt, ot, sp&a, med, pc, educ,psych.
11	Sarvoday Matimand Residential School	Naagtana Road, Gandhi Ward, Thiroda, Godia		6 to 17	resi, pre voc trg,	pc, med, educ
12	Sashi Mangalam School in Need of Special Care	A-45, Yashodham, Enclave Gen.A.K. Vaidya Marg, Near Dindoshi Bus-Depot, Goregoan (East), Mumbai - 400063	Maharastra	5 to 18	day care	pt, pc, psych, ot, med, educ.
13	Satya Niketan Special School Padinjattinserry,	Kaviyoor P.O., Thiruvalla, Pathanamthitta Distt:- 689582	Kerala	5 to 27	integ, voc trg.	pt, sp&a, pc, psych, med, educ
14	Satyasai Poor People Education & Economic Development Society	D.No.28-5-122, Housing Board Colony, Ananthapur - 515001	Andhra Pradesh	3 to 14	day-care	pt, sp&a, pc, psych, med, educ
15	Sawera	C/o St. Stephen's School, Sector 45-B, Chandigarh - 160062	Chandigarh	3 to 20	resi, day-care, pre voc trg, hbt	pt, sp&a,pc, ot, educ, yoga,drama therapy
16	Shamkamal Charitable Trust	Plot No.7, Dattu Colony, Race Course, Kolhapur - 416 012	Maharastra	above 18	voc trg.	pt, pc, psych,
17	Shanmuga Society for Mentally Challenged	Plot No.44, Phase 3, Kamalapuri colony, Hyderabad - 500873	Andhra Pradesh	3 to 15	day care	sp&a, pc, educ



Sl. No.	Name of the Orgn.	Address	State	Age Range (Years)	Type of Institution	Nature of services
18	Shanthi Special School	Ravi Babu Home, H.No.7-6-105, Vidhya Nagar, Jagtial, Distt: Karimnagar - 505327	Andhra Pradesh	6 to 30	day-care, voc trg, hbt	pc, psych, educ
19	Shri Balaji Shikshan Prasarak Mandal	Guruwar Peth, Ambajogai, Distt: Beed -431517	Maharastra	4 to 18	resi, spec. cl., pre voc, day care, integ, voctrg,hbt	pt,sp&a, pc, psych, med, educ.
20	Shri Sant Gadgebaba Educational Society	Pachore, Distt: Jalgoan,	Maharastra	9 to 18	resi,	educ.
21	Shubhasheesh Siksha Avam Vikas Sewa Sansthan	E-27, Mill Area, Amawan Road, Rae Bareli	Uttar Pradesh	all	resi, spec. cl., voc, day care, integ, voc trg, hbt	pre pt, pc, educ
22	Smile rehabilitation & children welfare samiti	Il Pulia, Near Azim Estate, Sir Syed Nagar, Aligarh - 202002	Uttar Pradesh	3 to 25	day care, voc trg,hbt	pt,sp&a,pc, psych, ot, med, educ.
23	Snehabhawan	Gandhinagar P.O., Kottayam, 686005	Kerala	3 to 27	pre voc trg, day- care, voc trg, hbt	pt, pc, oc, educ
24	Society for rehabilitation of Mentally Challenged	Bhartiya Vidya Bhavan, Mandhy Marg, Sector 27, Chandigarh - 160019	Punjab	upto 5	pre-voc., voc trg., psych, ot,	pt, sp&a,pc, educ,
25	Spoorthi Special School for MR	Near Nagarjuna School Ramgampally, Peddapally, Distt: Karimnagar - 505 172	Andhra Pradesh	3 to 18	resi, pre voc trg, day care hbt	pt, sp&a,pc. Psych, educ
26	St. Francis Home (Regd) Society Panhankot	Jandwal P.O., Dalhousie Road, Pathankot - 145 001	Punjab	4 to 18	day care, hbt	pt, sp&a, pc, ot, educ, cbr
27	Sudarshan Rehabilitation Society for Exceptional Children	Flat No.204, Golden Threshold Appts., Vahininagar, Sikh Road, Secunderabad-500 009	Andhra Pradesh	upto 13	integ, hbt	pt, sp&a, pc, psych, ot, educ.
28	Suraksha	302, Bhagiradh Appts., Vidhyanagar, Hyderabad - 500 044	Andhra Pradesh	4 to 35	spec. cl, day-care, voc trg, hbt	pc, educ



Sl. No.	Name of the Orgn.	Address	State	Age Range (Years)	Type of Institution	Nature of services
29	Swa-Sahaya Vocational Training Centre for Handicapped (Adult)	At: Buomal, P.O. Sarbahal, Distt: Jharsuguda 768201	Orissa	15 to 35	resi, day-care, voc trg,	pt, sp&a,pc, psych, ot, med, educ, yogatherapy
30	Swikar Durbal Manask Mulanchi Niwassi Shala	Dhirajgram, Hasambai petrol pumpasamor, Nagpur Road, Tadali, Chandrapur -442 401	Maharashtra	6 to 18	resi, pre voc trg, shelt ws, voc trg,	pc, psych, med, educ
31	Upkaar Rural Institute for Rehabilitation of Disabled	(Under Sweekar Institute) Govt. Area Hospital, URIRD, Tandur, R.R. Distt.	Andhra Pradesh	5 to 15	day care	pt, sp&a, pc,
32	Vatsalya Society for the Welfare of Disabled and Aged	5-83, Indiranagar, Near Mahila Pranganam, Nalgonda Road, Nalgonda - 508001	Andhra Pradesh	5 to 18	resi, integ,	sp&a, pc, med, educ
33	Viklang Sanskarthirith Trust	407, Sahjanand Trade Centre, Opp. Kothawala Flats, Pritamnagar, Ellisbridge, Ahmedabad - 380006	Gujarat	all	day care, hbt	pc, psych, med, educ.
34	VRC Special school for Intellectually Handicapped	Vettom, P.O. Tirur, Malappuram	Kerala	5 to 21	resi, pre-integ, voc trg psych, ot,	pt, sp&a,pc, voc trg, med, educ.
35	Yamini Educational Society, School for Mentally Challenged Children	Plot No.5-80-C/2, Vivekananda Nagar Colony, Kukatpally, Hyderabad - 500 072	Andhra Pradesh	5 to 20	resi, day-care	pt, sp&a,pc, psych,ot, med, educ



## ANNOUNCEMENT

Dear Readers,

You may be aware that NIMH is an organization with proclaimed vision, mission and value statements. Any developing organization may review their vision, mission and value statements for future endorsement depending upon the prevailing situations. The present statements on the above important components were developed in the context of the Legislative Acts such as Rehabilitation Council of India Act 1986. Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995. National Trust for the Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act 1999. Right now we have a National Policy for Person with Disabilities, 2006 followed by our commitments of the UN Convention on the Rights of Persons with Disabilities-2007, and the Biwako Millennium Framework for Action towards an Inclusive, Barrier Free, and Rights Based Society for Persons with Disabilities in Asia and the Pacific – 2003 to 2012.

In this context, we feel that support of all the stakeholders are essential to redefine the vision and mission and value statement of NIMH. Your information may be expressed as per the choice given in the table given below.

Vision, Mission & Value Statements	Do you agree with our Vision, Mission & Value Statement (Yes/No)	If 'No' please give remarks/suggestions
<b>Vision :</b> The quality of life of every person with mental retardation is equal to that of other citizens in the country in that they live independently to the maximum extent possible.		
<b>Mission :</b> Through constant professional endeavors, empowering the persons with mental retardation to access the state-of-the-art rehabilitation intervention viz., educational, therapeutic, vocational, employment, leisure and social, sports and cultural programs and full participation.		
<b>Value Statement :</b> NIMH values equal opportunity, protection of rights and full participation for persons with mental retardation.		
NIMH believes in participation of persons with disabilities, parents, professionals, employees, and other stakeholders in the rehabilitation programs that are client focused.		

You may be either send your comments directly to us by post or download the same information from our website and mail it to us.

Email : [hyd1\\_nimhldhk@sancharnet.in](mailto:hyd1_nimhldhk@sancharnet.in) or [nlnimh@gmail.com](mailto:nlnimh@gmail.com) Website: [nimhindia.org](http://nimhindia.org)

- DIRECTOR, NIMH

## FORTHCOMING CONFERENCES / SEMINARS

Title : **IASSID 2nd Asia - Pacific Regional Congress : 'Creating Impossibilities for an Inclusive Society'**  
 Venue : Singapore.  
 Duration : 24 – 27, June 2009.  
 Contact Address : [www.iassid.org](http://www.iassid.org)

Title : **46<sup>th</sup> National Conference of Indian Academy of Pediatrics**  
 Venue : Bangalore Place Grounds, Bangalore.  
 Duration : 22 – 25, January 2009.  
 Contact Address : Dr. R Nisarga, Chief Organizing Secretary, PEDICON 2009.  
 KIMS Hospital & research Centre,  
 K R Road, V V Puram.  
 Bangalore – 560 004. Karnataka  
 Email: [iap@pedicon2009.org](mailto:iap@pedicon2009.org)  
 Website: [www.pedicon2009.org](http://www.pedicon2009.org)  
 Phone : (80)3243-8384 / 9478  
 Fax : (80) 26608262

Title : **TASH Anual Conference**  
 Venue : Nashville, TN.  
 Duration : 3-6, December 2008.  
 Contact Address : 888/221-9425;  
 Email: [THC@housingregistration.com](mailto:THC@housingregistration.com)  
 Web site: <http://www.tash.org>

Title : **International Reading Association, 54<sup>th</sup> Annual Convention West**  
 Venue : Phoenix AZ.  
 Duration : 21 – 25, February 2009.  
 Contact Address : 800/336-7323  
 Email: [customerservice@reading.org](mailto:customerservice@reading.org)  
 web site: <http://www.reading.org>

Title : **National Association of School Psychologists, 41<sup>st</sup> Annual Conference**  
 Venue : Boston, MA.  
 Duration : 24 – 28, February 2009.  
 Contact Address : 866/331-6277  
 web site: <http://www.nasponline.org>

Title : **Learning disabilities Association, 46<sup>th</sup> Annual Convention.**  
 Venue : Salt Lake City, UT.  
 Duration : 25 – 28, February 2009.  
 Contact Address : 412/341-1515  
 web site: <http://ldantl.org>.

## FORTHCOMING TRAINING PROGRAMMES AT NIMH

S.No.	Title of the Programme	Date *	Coordinator(s)
1	Training Programme on Communication aspects of autism for professionals and special educators	2nd to 6th February 2009	Shri N.C. Srinivas
2	Programme on transition from school to work	2nd to 6th February 2009	Smt. Nibedita Patnaik Shri P.Sammaiah
3	Programme on vocational training and employemnt	9th to 13th February 2009	Shri P.Sammaiah
4	Empirical research in special education practice	9th to 13th February 2009	Smt.V.R.P.Sheilaja Rao
5	Programme on psycho social management of families with adolescent/adult persons with mental retardation	23rd to 27th February 2009	Shri B.Ashok

## TRAINING PROGRAMMES AT NIMH REGIONAL CENTRES

S.No.	Title of the Programme	Date *	Coordinator(s)
1.	Early intervention in delay development (Mumbai)	16th to 21st February 2009	Smt. Sangeeta Raulkar
* Subject to change please check.			

## **VISION**

The quality of life of every person with mental retardation is equal to other citizens in the country; in that they live independently to the maximum extent possible.

## **MISSION**

Through constant professional endeavours, empowering the persons with mental retardation to access the state-of-the-art rehabilitation intervention viz., educational, therapeutic, vocational, employment, leisure and social, sports and cultural programmes and full participation.

## **VALUE STATEMENT**

NIMH values equal opportunity, protection of rights and full participation for the persons with mental retardation. NIMH believes in participation of the persons with disabilities, parents, professionals, employees and other stakeholders in the rehabilitation programmes that are client focused.



## **National Institute for the Mentally Handicapped**

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