Annual Report
2012-2013

Action for Ability Development and Inclusion
Vision, Mission Statements

Vision:

AADI’s vision is of a world in which persons with disabilities are an integral part of society, participating in the community and living life to the fullest, with equitable access to opportunities and services.

Our Mission:

The focus of our work will be to facilitate enabling environments in the best interest of the child and the adult thus ensuring equitable, accessible, quality assured services using a life span approach. We will be informed and guided by the needs of persons with disabilities who are further marginalized by poverty and gender inequalities.

Through our work we will:

• Facilitate, nurture and support opportunities for leadership and greater involvement of people with disability in decision-making regarding their own lives and the processes within their community.
• Influence and develop systems and processes to ensure that there is no exclusion, exploitation or stigmatization of the persons with disabilities at the levels of policy and its implementation within their community.
• Research, develop and implement service delivery models that can be adapted according to geographical and cultural realities/ contexts.
• Build technical, financial and human resource capacities of
  - Persons with disabilities
  - Professionals
  - Larger Community
  - Build technical, financial and human resource capacities of AADI

Our objectives are to:

• Reduce the service gap: by increasing access to services, ensuring quality of services, addressing all life domains – education, health, livelihoods, recreation, shelter, well-being, safety and permanence of services.
• Reduce the inclusion gap: by mapping, sensitizing and building the capacities of mainstream resources in education, health, livelihoods, recreation etc.
• Reduce the participation gap: by increasing the participation of users/user groups in our work, building capacities of people with disability and facilitating participation in decisions about activities pertaining to their lives, influencing membership of people with disability in local governance and other leadership positions within the community.
• Reduce stigma and exploitation: by increasing awareness about rights and needs of people with disability through information dissemination, media watch, social watch, and right to information activities.
• Reduce the resource gap: Technical, Financial and Human Resource by: increasing revenue streams, improving knowledge base, and developing need based and appropriate professional development programs

Values & Guiding Principles

Our work is guided by the core human values of respect, dignity and the autonomy of persons with disability and their carers. Strengthening capacities of all stakeholders will be central to our work. We will work towards being collaborative, participative, strategic, transparent, equitable, non-discriminative, accessible, and accountable in all that we do. We will follow the norms of safety and quality assured services in our work.
Dear Friends,

It is with a great sense of humility and gratitude to all those who supported our move to change, that I write this note.

Change is not a new phenomenon at AADI. All our processes over the past 35 years have evolved as we understood the needs of people with disability better. Therefore, in a way, our dynamism and the values that determined our work was a precursor to herald yet another change – a change dictated by the tenets of the UNCRPD and the Right to free and Compulsory elementary education that our country has committed to.

The translation of our VISION/MISSION statements into action necessitated the change in the structure and functioning of programs. The steady progress towards creating new processes at the field level in AADI, the knowledge gained from the sector, internalization of the paradigm shift and the significant decisions at the Board level paved the way to a restructured process of work.

AADI School, PG diploma Courses in Education and Developmental Therapy, Home Management Program and the Vishwakarma Work Training Center transformed into processes/programs with contemporary thinking and knowledge. ATP was the first to have evolved into Inclusive Opportunities and DOR. Early Intervention moved from the hospital base to Care-plan Processes and parent training. AADI school had all its students integrated into mainstream schools and evolved into a larger education program – working with out of school children in AADI and with private and Government schools in Delhi. DU courses in Special Education and Developmental Therapy closed to start new contemporary courses and evolve SRS into conducting short term and eventually long term programs relevant to the field.

Our work with people with disability focused on the individual needs of Identity; Health and Mental Health; Education; Livelihoods; Recreation; Relationships and Supported Living. Building community resources, understanding barriers, linking with advocacy and policy matters were integrated into the work.

During the year our focus also included incorporating the principles of Accessibility, Participation, Evolving Capacity, Inclusion, Universal Design and values of Dignity, Respect, Purpose and Togetherness. Our programs in transition are:

<table>
<thead>
<tr>
<th>AREAS OF WORK</th>
<th>COMPONENTS UNDER EACH AREA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community based Habilitation and Rehabilitation</td>
<td>Rural based : Ballabgarh, Haryana</td>
</tr>
<tr>
<td>programs</td>
<td>Rural based: Alwar,Rajasthan</td>
</tr>
<tr>
<td></td>
<td>Urban Based – Inclusive Education Program in Delhi ; Awareness Raising in Chattarpur, Delhi</td>
</tr>
<tr>
<td>Sambhav : Making Inclusion Possible</td>
<td>Careplan ; IO &amp; DOR ; Resource Center; State Nodal Agency Center( National Trust)</td>
</tr>
<tr>
<td>School of Rehabilitation Sciences</td>
<td>Short term courses – PT/OT; Education: In-Service training</td>
</tr>
<tr>
<td></td>
<td>Parent training program</td>
</tr>
<tr>
<td>Advocacy ,Policy and Research</td>
<td>Policy Watch; Media Watch</td>
</tr>
<tr>
<td></td>
<td>Awareness Sensitizing programs ; News Letter</td>
</tr>
</tbody>
</table>
While the field level work was undergoing a transformation, newer initiatives aligned to perspectives were initiated. A few examples would include - : The launch of Sambhav – A national Resource Center promoting access and inclusion; Training of Master level Directors for the “Caregivers Training Program”; Collaborative work with BODH Shiksha on Inclusive Education; Alumni study to understand barriers and supports required for mainstream education; Creating assessment tools and training modules that would directly impact the quality of work; Planning and Implementing the training program across Northern India for Census -2011; Planning for a National Level Awareness Raising Program with National Trust; Increased participation and visibility in Advocacy and Policy work related to XIIth Plan and Legislation with a focus of aligning both to the principles of UNCRPD.

Future Framework
The focus for the future requires an understanding of each of the articles of the UNCRPD (see table below) and incorporating it into our work. Currently we are focusing on the highlighted areas with respect to our work with individual person with disability.

<table>
<thead>
<tr>
<th>Equality and non-discrimination</th>
<th>Right to life</th>
<th>Situations of risk and humanitarian emergencies</th>
<th>Equal recognition before the law</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to justice</td>
<td>Liberty and security of person</td>
<td>Freedom from torture or cruel, inhuman or degrading treatment or punishment</td>
<td>Freedom from exploitation, violence and abuse</td>
</tr>
<tr>
<td>Protecting the integrity of the person</td>
<td>Liberty of movement and nationality</td>
<td>Living independently and being included in the community</td>
<td>Personal mobility</td>
</tr>
<tr>
<td>Freedom of expression and opinion, and access</td>
<td>Respect for privacy</td>
<td>Respect for home and the family</td>
<td>Education</td>
</tr>
<tr>
<td>Health</td>
<td>Habilitation and rehabilitation</td>
<td>Work and employment</td>
<td>Adequate standard of living and social protection</td>
</tr>
<tr>
<td>Participation in political and public life</td>
<td>Participation in cultural life, recreation, leisure and sport</td>
<td>Accessibility</td>
<td>Statistics and data collection</td>
</tr>
</tbody>
</table>

We take great pleasure in sharing the highlights of our work, captured in the following pages. The financials and the human resources at AADI are listed out at the end of the report.

On behalf of the Board, Staff and members at AADI I thank each one who walked along with us and supported us in the work.

In Peace

Syamala Gidugu
Secretary and Executive Director
# Table of Contents

**Vision, Mission and Strategic Objectives**  
**Executive Directors Note**  
**Highlights of 2012-2013**

**Part I: Community Based Habilitation and Rehabilitation**

1. Rural Based located in Ballabgarh, Haryana ................................................................. 6  
2. Urban Based located in Chattarpur, Delhi ................................................................. 11  
3. Rural Based located in Alwar, Rajasthan ................................................................. 12

**Part II: Sambhav-Making Inclusion Possible**

4. Care Plan Services ........................................................................................................... 16  
5. Education ......................................................................................................................... 18  
6. Diverse Opportunities and Resources ........................................................................... 20  
7. Inclusive Opportunities ................................................................................................. 23  
8. Sambhav: Resource Center - State Nodal Agency Center (National Trust) .............. 26

**Part III: School of Rehabilitation Sciences**

9. Capacity Building for Disability Specific Professionals .................................................... 28  
10. Capacity Building for Families of People with Disabilities ........................................... 30  
11. AADI Staff In-Service training ....................................................................................... 31

**Part IV: Advocacy, Policy and Research**

12. Twelfth Plan Work ......................................................................................................... 34  
13. Rural Community Based Rehabilitation Survey ......................................................... 35  
14. Study on Integration in education .................................................................................. 35  
15. Awareness Raising and Sensitizing programs  
   15 a. Republic Day Disability Tableau 2013................................................................... 36  
   15 b. Badhte Kadam IV ................................................................................................... 37  
   15 c. Badhte Kadam IV: Delhi State Activity ................................................................... 38  
   15 d. Porters Training ..................................................................................................... 39  
   15 e. Delhi University Higher Education Faculty Sensitization .................................... 39  
   15 f. Newsletter ............................................................................................................... 40

**Financial and Human Resources**

16. Financial Statements ..................................................................................................... 42  
17. AADI Staff List ............................................................................................................ 43  
18. Governing body of AADI ............................................................................................ 44
Highlights of 2012-2013

- **Quality of life programs**: 1365 persons with disabilities were linked to quality of life programs through care-plan/IO/DOR/RCBHR
- **Inclusive educational support sessions held**: 563 school children in Delhi/Ballabgarh/Alwar
- **Opportunities for learning life skills**: 232 persons with disability accessed opportunities for experiencing participation and learning life skills through events/workshops like the flower shows, winter campaign, Art exhibition, Jam Sessions, shopping experiences, children's day celebrations, sports and quiz competitions
- **Training and Supported Employment**: Rural based employment –118; Internships and work exposure –25 in Delhi; new contacts made in Delhi – 12
- **Parent trainings**: 215 parents attended trainings on various topics like perspectives on rights and inclusion; parenting skills; training on mobility, communication and self-care; property rights; use and maintenance of hearing aids; Right to education; inclusive education; medium of language for learning amongst children
- **Inclusive and Specific health sessions/events held**: Nutrition workshops and maternal and child care—750 people from 30 villages; Linked to Niramaya Health Insurance scheme –250 persons with disability; children linked to medical intervention through BODH – 256
- **Inclusive Service Providers**: 294 professionals trained through continuous professional development activities. Training sessions with faculty from Delhi University –3 programs (95 faculty members attended); PT/OT Training: Advanced modules-9 therapists attended; Teachers/Supervisors from Bodh Shiksha(Alwar) – 130 teachers; 52 teachers from Delhi Schools on aspects of inclusive education
- **Awareness Raising/Sensitization of individuals**: Office of the District commissioner (150); teachers (100); porters (1550), NGOs(22); Visitors to Sambhav Resource Center( 615); Badthe Kadam Events of National Trust ( 6 events -1525); Information Booths on World Disability Day (25 booths and 500 people); Inclusive Games with teachers and children (365); Republic Day parade-(National level broadcast).
- **Advocacy/Policy/Planning at a macro level**
  - *New Law*: Part of the team to develop an alternate law on the Rights of People with disability and ongoing advocacy to pass a comprehensive law covering all rights of all people with disability; *Xilth Plan*: Advocated with Planning Commission to include people with disability/professionals/experts into the steering committees/working groups of various ministries; Facilitated the writing/have written recommendations to include needs of people with disability in at least 9 important Ministries; Ongoing advocacy to increase allocations
- **Assessment and training modules developed**: These had to be developed keeping in mind the rights based framework. Specific assessments developed for mobility, communication, self-care, and access audits. Training modules were developed for subject teaching, impairments and parent training.
- **Research**: Survey in 25 villages to map resources, identify people with disability and volunteers in Ballabgarh; Study on mainstream educational experiences of 200 children with disabilities
Community Based Habilitation and Rehabilitation

Article 26 of the CRPD is reproduced below. At AADI our attempts are to review our work against the principles of Article 26 and evolve accordingly. The current status of work is elaborated in the following pages.

Article 26: Habilitation and rehabilitation

1. States Parties shall take effective and appropriate measures, including through peer support, to enable persons with disabilities to attain and maintain maximum independence, full physical, mental, social and vocational ability, and full inclusion and participation in all aspects of life. To that end, States Parties shall organize, strengthen and extend comprehensive habilitation and rehabilitation services and programmes, particularly in the areas of health, employment, education and social services, in such a way that these services and programmes:
   (a) Begin at the earliest possible stage, and are based on the multidisciplinary assessment of individual needs and strengths;
   (b) Support participation and inclusion in the community and all aspects of society, are voluntary, and are available to persons with disabilities as close as possible to their own communities, including in rural areas.

2. States Parties shall promote the development of initial and continuing training for professionals and staff working in habilitation and rehabilitation services.

3. States Parties shall promote the availability, knowledge and use of assistive devices and technologies, designed for persons with disabilities, as they relate to habilitation and rehabilitation

- Rural Community Based Habilitation and Rehabilitation
- Urban Community Based Habilitation and Rehabilitation
- Education: B-A-G (BSS-AADI-GEF) project on inclusive education
1. Rural Community Based Habilitation and Rehabilitation

The Rural Community Based Rehabilitation Program is based in the Ballabgarh block of Faridabad district of Haryana. Its focus is to facilitate the creation of a responsive community and development of inclusive services, which fulfil the rights of persons with disabilities.

It works in 83 villages and 9 colonies in the peri-urban areas. These 83 villages are governed by 65 Panchayats. Eight hundred and seventy six persons with disability and their families are part of the program. Forty five persons with disabilities were identified this year.

Across the year, review was done through regular visits and support was given to all the 876 persons with disability registered with the program. Community /individual resources were also developed through these visits where regular demonstration of skills and problem solving was done with all stake holders. Five hundred and twenty nine persons with disability were referred for orthopaedic, eye specialist, ENT specialists, dentists, urologist, neurologist and psychiatrist.

Children with disabilities (0-6 Years)

The focus of the work is on enhancing participation of children in all the activities of the families and community. The identification of needs was done for all 84 children with disability through 350 specific assessments in areas of self-care, mobility, communication, socialization and learning/pre-education. For all children, individualized programs were developed for capacity building through creating opportunities for participation.

There are 90 children with disabilities below the age of six years and 80 are registered with Aanganwadis in their respective villages and 10 children with disabilities are in school. Out of 80 children, 61 are regularly going to Aanganwadis and have shown remarkable improvement in their health, communication, socialization and other areas like functional mobility, self-care and learning. Regular follow-up of the nutrition program through families and Aanganwadis for 16 children who were malnourished helped to impact their health positively. 12 children were identified as being in the high risk category in different villages and their follow-ups are ongoing with the Aanganwadis. 2 children with disability got disability certificates.

Family Level Work

The families of 84 children were supported across the year through regular meetings in Aanganwadis, at homes and sub centers. Families were informed about the importance of health and nutrition, prevention of secondary impairment, skill building in self-care, mobility, communication, socialization and pre-education. Mothers of these 84 children were trained through demonstration sessions to facilitate skill building of their children. Mothers and other care takers also felt supported to address impairment related issues in the families and community. 11 mothers were linked with scheme known as “Janani Suraksha Yojana” under which they got monetary support. 3 mothers registered their second daughters with impairment for Ladli Schemes.

Community Level Work

All young mothers are linked with Aanganwadis for services in health, nutrition and early learning of their children. Health related awareness activities for teenage girls and young mothers were organized in 25 villages where around 350 young women were covered. This helped to identify children with disabilities in their neighborhood (45 new children were linked with Aanganwadis).
Children with disabilities (6 to 18 yrs)

The prime focus for this age group is education and equal opportunity to learn without any kind of discrimination besides fulfillment of other needs for increasing participation in all age related activities with others. A total of 394 children with disability are under this age group and this year, 31 new children with disabilities were registered. Specific assessments were done for 394 children in the areas of mobility, self-care, education, hearing, communication, socialization and life skills. Twenty eight children obtained their disability certificates. Seven children with intellectual impairment (children with very high support need, who do not go to school) got monetary help under ‘Mand Budhi Bachon ki Vittiya Sahayata’. A hundred adolescents (12-18 yrs) who either could not go to school or dropped out because of lack of human support and curriculum inflexibility, were covered under the life skills program at their homes.

Health Needs
Three children with disability underwent surgical intervention at St. Stephen’s, All India Institute of Medical Science and Kalawati hospitals. One of these three children was operated for management of epilepsy and the other two were operated for orthopedic reasons. Fifty eight children with disability were referred for epilepsy follow-up. Twenty children got their Niramaya Cards under the National Trust Health Insurance Scheme.

Aids & Appliances
Ninety three children with disabilities were provided aids and appliances to facilitate movement, communication, learning, and participation in daily activities and hence increase access to school.

Primary and Secondary Education
Forty children with disabilities were ready for their inclusion in mainstream schools in the next academic session through individualized support. 35 children got admission in different schools and 28 children attended school on regular basis. The remaining seven, were irregular because of reasons like lack of support to go to school when both parents are working, other siblings do not go to school as well or schools find it difficult to work with children with high support needs because of lack of training and resources. Two hundred and ninety four children are registered in the primary and senior sections of the schools. One hundred and fifty four children with impairment are at primary level whereas 90 children are in middle schools and 50 are in senior secondary schools. Twenty two children/ persons with disability appeared for class X and XII board exams this year. All schools were familiar with the facilities given by Government to children with disability. Twenty eight children appeared for class IX and XI exams.

One hundred and seventy children with impairment were provided support in education through individual sessions at sub centers and simultaneously capacity building was done for parents, siblings, volunteers and tutors through demonstration and role modeling. Ninety three children with disability who study in schools were supported through specific teaching inputs given by resource people from the community. Forty six children studying in the mainstream schools, who have hearing impairment, have been supported through regular inputs in communication, education and management of hearing aids.

A sixth class student in Government Senior Secondary School, using a wheelchair, belonging to a low socio economic background raised her voice against being excluded from a school outing, which was being conducted by SSA. She called the BEEO from a friend’s phone and took the permission from her to go to Akshar Dham, and the school had to comply.
Regular use of augmentative and alternative modes of communication by 5 children promoted their participation in self-care, communication, academics and social areas in school. 78 children with disabilities participated in other activities like collecting and distributing note-books/papers, bell ringing, helping in ration distribution, watering the plants, locking the rooms after school time etc. These activities helped children with disability to develop life skills and to stay in the school for the whole day.

Nazia was refused admission in her school, when she did not clear the 12th board from Government Senior Secondary School. She was very keen to get regular education since her family was after her to get married and she wanted to study further in the same school. The School suggested NIOS but she refused and went to meet the education authority in Bhiwani Board. The Bhiwani office helped her and arranged a provisional mark sheet for class 12th for admission purposes. Nazia submitted all the necessary documents and got admitted.

In the community

With schools
Regular support to teachers helped to build the capacity of a total of 258 teachers in 142 primary, middle and senior secondary schools to identify the needs of children with disability and barriers to inclusion and to work towards removing those barriers. This year 15 new schools admitted children with disability. 173 teachers from Government schools were supported on effective teaching strategies in primary and middle schools. Teachers in 5 schools started using adapted teaching material. 9 schools conducted inclusive games, where 65 children with disability participated.

Accessibility
In fifteen schools, 25 new ramps were constructed. Accessible toilets were constructed in 18 schools and 2 new ramps were constructed in Agarwal College.

School Management Committee (SMC)
Eighteen parents of children with disability became the members of school management committee to work for school development as mandated under the Right to Education Act.

Other Education Resources
- Eighty four girls in Agarwal College and seven staff members were sensitized about disability issues and challenges faced by persons with disability due to environmental barriers.
• Sixteen new resource people were trained to give teaching inputs on regular basis. Fifty four children have shown remarkable improvement in their academics and others are learning at their own pace.
• Twenty seven Assistant Block Resource Coordinators were sensitized about needs of children with impairment so that the evaluation process could be changed in schools.

**With Families**
One hundred and seventy eight parents were provided continuous emotional support and guidance on issues regarding admission in school, safety, strained marital relations, alcoholism, domestic violence, social and family pressures, etc. Sixteen parents attended a workshop on issues of safety and security of their children. All parents were informed during individual meetings about safety issues related to their children. Fourteen families applied and got the facilities under ‘Nirashrat Bachchon ki Scheme’. Five families got plot under BPL scheme.

*Parent to Parent Support*
Parents supported each other towards fulfillment of needs of their children like admission in the schools, going out for recreation, getting disability certificates, railway pass, applying for scholarship/pension, to open bank account, completing the documents for Niramaya Schemes, medical referral, getting loan, giving information to each other etc. They also support each other during stressful situations.

*Parent group*
Twenty five parents meet regularly in the group. They share information, discuss difficulties and workout strategies to overcome their difficulties.

**18 yrs and above**
The focus for this age group is fulfilling the right to livelihood and purposeful occupation. Three hundred and ninety two persons are registered with the program which includes 13 new people. Assessments were done for all 392 persons with disability through specific assessments in the area of life skills, vocational and occupation skills. A total of 300 persons with disabilities were supported on regular basis. Thirty nine persons with disability are studying in class X-XII in secondary schools. While eighteen are in colleges doing graduation and other professional courses. One hundred and twelve persons with disability are involved in domestic activities. Thirty seven of them are able to look after their house independently and seventy five persons with disability participate in domestic activities with support. Thirty persons with disability need total care and they are fully dependent on care taker for fulfilment of their needs. Six persons with disabilities have decided not to work till they do not get the desired salary.

*Health*
Fifty eight persons with disability were on epilepsy medication, seven took preventive measures for pressure sores and eight were referred for psychiatric treatment. One person with spina bifida was referred to urologist for review. Fifteen persons with disability became registered for Niramaya Scheme.

*Aids & Appliances*
Fifty one persons with disabilities were provided 61 aids and appliances. Five persons with disability got three aids each.
In the Community

Livelihood
Livelihood training is made available to all persons with disability, using existing facilities in the community, including the family and/or the traditional occupation. Sixty nine persons with disability are in open employment, thirty seven are in self-employment and six have done vocational courses but do not have a job yet. Eleven are employed in family business. Eleven are independent in agriculture tasks and 53 are in cattle caring and agriculture with support. Thirteen persons with disability are placed in open employment set- up, where 4 are getting more than 10,000 per month as salary. Two persons with disability started the rubber cutting work with their families at home.

Skill Training
Through box making, 4 persons with disability have had the opportunity to develop their social and functional skills.

Leadership Training
Five persons with disability attended 2 days' workshop on ‘National Convention for persons with disabilities’, two of which expressed their desire to attend workshops in the future.

Resources
Apparel Training and Design Centre (ATDC) realised the need for changing the sewing machine for a person who has an impairment in both legs and also the content of the curriculum. Seven employers were contacted on a regular basis and informed about the skills and abilities of persons with disabilities. They decided to call 12 persons with disabilities for interview and 5 were selected for jobs. Two women with disabilities, who had got separated after marriage were rehabilitated and joined the ATDC course.

Families
17 families got plots under BPL facilities. Four families constructed toilets under Nirmal Gram Yojna. 3 families applied for Guardianship. Around 300 families were supported through information & resources for various issues, especially, regarding the safety & security for persons with disabilities.

Block level Events/Activities

World Disability Day
Twenty five villages were selected for sensitization about the rights and equal opportunities on ‘World Disability Day’. The inclusive games were organized with the support of school staff in all schools of the 25 villages which created massive awareness among teachers and children. Teachers and children accepted that they had never considered children with disabilities as sports persons.
2. Urban Community Based Habilitation and Rehabilitation

This was a new initiative this year. The team mapped Chattarpur area, and prepared a brief socio economic profile of the area including the number of colonies, the communities, terrain and available resource for education, health, recreation etc.

The UCBR project aims to create a pro-active, inclusive society which recognizes and welcomes all its members, by accepting and fulfilling the responsibility to bring about changes and modifications, in structures and institutions, as necessary to serve all members of society equally including persons with disabilities. This would translate into an increase in visibility of people with disabilities in institutions and public places – educational, vocational, medical, public services and utilities – as well as in places of normal commerce, recreation and entertainment with increased participation of people with disabilities. With consolidation and expansion of partnerships with the general community and social institutions (Governmental as well as private) services would be adapted and extended to people with disabilities according to their needs, with the community moving towards taking ownership of creating a more equal society.

There would be a strengthening of processes in the community, which would ensure safety, well being and permanence while addressing following needs of persons with disabilities: Health, Shelter, Education, Livelihood, Relationships, Recreation & Leisure, Identity, and Protection from abuse, neglect and maltreatment. It is important to focus on all these needs simultaneously so that every person with disability can lead a quality life.
3. Education: B-A-G (BSS-AADI-GEF) project on inclusive education

This project is a collaborative initiative of three organizations, Bodh Shiksha Samiti (BSS), Action for Ability Development and Inclusion (AADI) and Goodearth Education Foundation (GEF). The project is located in Alwar which is a district in the state of Rajasthan, in India. It aims to ensure that all children with disabilities have access to quality education, within the catchment area of the thirty nine BSS schools.

A brief overview of the activities undertaken under the project for the reporting year follows:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Dates</th>
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</thead>
<tbody>
<tr>
<td>Supervisors’ meeting and training</td>
<td>30 April 2012</td>
</tr>
<tr>
<td>Training of Teachers from 36 schools</td>
<td>13 and 14 June 2012</td>
</tr>
<tr>
<td>Supervisors’ meeting and training</td>
<td>14 and 15 September, 2012</td>
</tr>
<tr>
<td>Assessment camp for new children with disability from 32 schools</td>
<td>27, 28, 29, 30, 31 August and 1 September 2012</td>
</tr>
<tr>
<td>Supervisors’ meeting and training</td>
<td>5, 6 and 7 November 2012</td>
</tr>
<tr>
<td>School based individual children assessments</td>
<td>11,12,13,14 December 2012</td>
</tr>
<tr>
<td>School observation visits</td>
<td>26, 27,28 February (3 teams)</td>
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</tbody>
</table>

Till date, a total number of 380 children with various health issues have been identified. The health issues range from children having multiple medical issues to simple ear infections. Approximately 58 percent are males and 41 percent are females. While 56 percent belong in the age group of 6 to 10 years, 25 percent belong to the age group of 11 to 15 years.

Understanding children through assessments

Assessments of children from BSS Schools were conducted at Bodh Gaon from August 27 to September 1, 2012. Five multidisciplinary teams (a total of 13 people) collected information about the children and their families.

- This time around 237 children were identified by the teachers themselves. Bodh sent a list of these children out of which the AADI team decided that 126 would need further observation.
- Out of the total of 126 called, 119 children came over a period of six days from all 4 clusters. They came to Bodh Gaon, accompanied by their teachers and family members.
- The objective of the assessments was to gather baseline information, about the children, their families and environment that they live in and provide suggestions for issues which needed immediate intervention.
Accessing medical care services
Out of the total 380 identified children identified, 167 were supported in accessing medical care services this year. The team’s efforts to develop local medical care resources in Alwar block resulted in a marked increase of children accessing local medical services. While 151 new children were referred to medical resources in Alwar, 16 new children were referred to medical resources in Delhi. Fourteen children underwent ear operations.

School visits to meet children
Children were met again in their schools during December 2012. Four teams of two members each, covered the four clusters from December 11 to 14, 2012. The objective of these visits was to understand the children further, especially the education aspects, which had been identified after the first assessments in August 2012. In these visits, a total of 98 children were met and 28 schools were visited.

Teacher Trainings
Four supervisors’ trainings and one teachers’ training was during this project period. Training for all the 175 teachers of the 36 schools, was held at Bodh campus in Kukus on June 13 and 14, 2012. The methodology adopted in the trainings was mainly activity based, group and individual work.

Supervisors’ Trainings
This year the capacity building of supervisors and cluster coordinators became the focus. These cluster coordinators and supervisors were senior teachers as well as. It was realized that enhancing their skills would build their confidence to support teachers in schools as they also look into the educational aspects of the work in their respective areas. There are two supervisors for the two blocks of Thangazi and Alwar. These blocks are further divided into two clusters each. Each cluster has a cluster coordinator, so there are four coordinators. Two other coordinators facilitate the medical interventions required for children in all four clusters.

The first training was held on April 30, 2012 in Alwar Public School (APS). A film on UNCRPD was screened to highlight the rights of people with disabilities being the same as any other citizen of India. In the film, persons with disabilities who are the leaders in the disability movement in India, express their views about the current status and their future vision. This was followed by a discussion on the steps to be taken. The second training was held on September 14 and 15, 2012 in Delhi. The attempt here was to strengthen the process of supervision and to integrate the monitoring of inclusion of children with disabilities in this process. The third training was held on
November 5, 6 and 7, 2012 at Delhi. The focus of this training was to increase their information base regarding different impairments and highlight the roles of supervisors.

**School visits for schools observations and meeting teachers**
- School visits were planned with the objective of understanding the school environment, teaching practices in the classroom and child related planning. Model schools of each cluster were chosen for observation.
- Visits were made by the AADI team in two batches. The first visit was from February 26 to 28, 2013 and another team will visit from April 4 to 6, 2013. Cluster coordinators accompanied the teams.

**Key Accomplishments**
- Many children with disabilities have shown positive changes in behavior after the teachers have made an effort to pay attention and encourage children, extend support and appreciation for abilities of children with disabilities; this has made a marked difference in the confidence levels of many children.
- Approximately 175 teachers have information of impairments and the social model of disability. They have basic information about types of disabilities like visual impairment, hearing impairment, cerebral palsy, physical disability, polio, spina-bifida, mental retardation, mental illness, deteriorating conditions, epilepsy etc.
- The major change in teachers has been the difference in their attitude. They now pay attention to children with disabilities and try to include them. There is openness in teachers, to hear and implement the suggestions by AADI.
- The active participation of the cluster coordinators has increased towards the latter half of the year specially after their training.
- The number of medical interventions at the local level has increased manifold.
Sambhav: Making Inclusion Possible

The AADI team aims at facilitating inclusion and participation of person with disabilities within their environments. Any person with disability can connect with AADI through the care plan process and is provided access to early development guidance, educational support services, quality of life activities, inclusive opportunities for livelihoods and information on aids and accommodation through the different processes detailed in the following section. These processes help in making inclusion a reality in the lives of persons with disabilities.

- Care Plan Services
- Education
- Diverse Opportunities and Resources
- Inclusive Opportunities
- Sambhav Resource Centre
4. Care Plan Services

The care plan process aims to facilitate access to services by linking persons with disabilities and families to resources in the community. It also provides guidance to persons with disabilities and families about the rights of persons with disabilities, using a life span approach.

A total number of 2137 people have been registered since it began. Three hundred new families and persons with disabilities were reached this year.

<table>
<thead>
<tr>
<th>Age group wise first contacts</th>
<th>April 12 to March 13</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
</tr>
<tr>
<td>0 to 6 years</td>
<td>46</td>
<td>33</td>
</tr>
<tr>
<td>6 to 12 years</td>
<td>58</td>
<td>27</td>
</tr>
<tr>
<td>12 to 18 years</td>
<td>25</td>
<td>22</td>
</tr>
<tr>
<td>18 and above</td>
<td>61</td>
<td>28</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>190</strong></td>
<td><strong>110</strong></td>
</tr>
</tbody>
</table>

The care plan process started in July 2008, with the aim of developing comprehensive services for a person with disability taking into account abilities, barriers, avenues for participation and opportunities along with the impact of impairment the person with disability experiences. Comprehensive assessments, building capacities, linking the families to resources, developing/creating access to services/resources/events, training of parents/caregivers, crisis intervention and direct interventions are a part of the care plan process. Eventually the care plan process will be linked with the urban community project.

Currently the program provides a platform for walk-in-service to anybody who has a need – a family, a person with disability, professionals, volunteers, students etc. This program is largely supervised by the senior team members who assist in maintaining the quality of service, especially in the understanding of needs, capacities of the person with disability and barriers in the environment.

The Home Management project within the Care Plan Process is funded by the Ministry of Social Justice & Empowerment. It has two components, namely, the Early Intervention Program and the Outstation Program. The Early Intervention Program looks into the needs of children in the age group of 0-6 yrs from Delhi and the National Capital Regions, whereas, the Outstation Program caters to children, adolescents, adults and their families who come from the Northern states of our country.

Early Intervention

The early intervention process focuses on the evolving capacity of the child through parent training, and on linkage to appropriate opportunities so that the child can participate optimally in different domains of life.

The early years are significant for learning and going to school enhances the opportunity for learning. Young children are met in groups to prepare them towards schooling by increasing their opportunity of participation in play, communication, social interaction, self-care etc. There were interaction with 79 children in Early Intervention Program (0-6 yrs) and their families, besides review sessions with 29 children. Hence, the total number of families that were met in the Early Intervention Program from April 2012-March 2013 was 108.
Outstation Program

The Outstation Program works with people across age and impairments residing outside Delhi. Families come with young children/adolescents and adults from various parts of the country, especially from the northern states of the country. The outstation program runs throughout the year from Monday to Saturday. It follows the Care-Plan process and works towards holistic development of the child/person with disability and capacity building. It also works towards linking these families to the resources/organizations in their own areas and also disseminates information about government schemes/facilities, rights of people with disability etc. This year, 42 families from places such as Bihar, Rajasthan, Punjab, Jharkhand, and Uttar Pradesh availed these services.

Networking and Linking to Resources

The process of getting the Disability Certification from IHBAS continues to be supported by AADI. Parents are given the information about the process at IHBAS. Aging parents and adults with disability with high support needs are provided transport and accompanied by the AADI team and AADI vehicle to reach IHBAS and apply for the disability certificate.

It is a continuous endeavor of the key worker to link the families with National Trust for the Health Insurance Scheme, called “Niramaya” and support them for getting the reimbursement. A few families were linked to Kiwanis, a resource agency for free orthotic aids while for some others sponsorship was raised for mobility aid, medicines, medical referral and diagnostic tests.
5. Education

Overview and school related data

This year marked the beginning of the third year of implementation of Right to Education Act. This was the last of the three years given to schools to prepare themselves for including all children, after which CBSE will start de-affiliating schools. At the end of two years, neither the government nor private schools seemed anywhere close to preparedness. Nevertheless, AADI continued its efforts towards making the education system more inclusive.

The team decided to adopt a school development approach rather than just an individual child focused approach. This meant more dialogue with the principals and other administrators to start work at the systemic level, and focused capacity building of the school and the teachers. At the same time with the parents also, the approach changed to making parents aware of their role in changing the system.

<table>
<thead>
<tr>
<th>Schools</th>
<th>No. of children till May 2013</th>
<th>No. of children admitted in 2012-13</th>
</tr>
</thead>
<tbody>
<tr>
<td>SKV</td>
<td>24</td>
<td>4</td>
</tr>
<tr>
<td>KV</td>
<td>12</td>
<td>5</td>
</tr>
<tr>
<td>MCD</td>
<td>15</td>
<td>9</td>
</tr>
<tr>
<td>Pvt</td>
<td>14</td>
<td>4</td>
</tr>
<tr>
<td>N P Primary</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>Play School</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Special School</td>
<td>11</td>
<td>1</td>
</tr>
<tr>
<td>Out of school</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>91</strong></td>
<td><strong>26</strong></td>
</tr>
</tbody>
</table>

Out of the ninety one children, in school fifty five were visited regularly. Thirty nine children were visited on a weekly basis in the schools, nine on a fortnightly basis, one on a monthly basis and six on a quarterly basis. The remaining children were not visited in schools as some schools did not permit AADI’s resource person to visit the classes and interact with teachers.

The School Process

From the beginning of the year, a support plan was followed to get children with disability with high support needs admitted in schools. A review of the schools in the South District was done and more frequent visits were planned to these schools. Quarterly visits were planned for schools in the other districts. A more specific customized plan was worked out for children with high support needs rather than fixing a specific day for visit to their school.

There were schools which were being supported for the last two years. Review of these schools was done with their principals to decide the frequency of direct classroom work and the school-level teacher training to build the overall capacity of the teachers. The discussion also included changes required in the system at the school level and the principal’s role in demanding the change from the higher authority.

At class level, the resource teachers from AADI started encouraging the school teachers to take more initiative and work independently towards planning, making teaching learning material, and
evaluation processes for children with disability. The teachers were encouraged to have a direct approach and relationship with the parents of these children.

Since last two years, AADI’s support staff had been going to two Sarvodaya Schools to support children with high support needs. Both the schools appointed a support staff each who were trained by the resource team from AADI.

In four private schools, approximately 50 teachers were sensitized and trained in impairment specific interventions and management within and outside the classroom over 6 training sessions. During the entire year, thirty meetings were held with the principals and the headmasters of different schools.

There were some schools where the principals did not give permission for classroom level work. In these schools, it was decided to work through the parents and they were encouraged to interact more with the teachers and the principals. They were encouraged to demand for their child’s right wherever there was a gap. (e.g. SKV Netaji Nagar, KV Vasant Kunj, NP primary Gole Dak Khana)

**Capacity Building of the Parents**

There has been a shift from child-focus to focusing on the parents’ role in changing the education system towards inclusion of all children. There has been regular sharing at an individual level as well as through group sessions regarding the provisions in RTE, regarding School Management Committees and role of parents in the same. Special meetings regarding these issues were held with the two Sarvodaya schools which have more than 6-7 children with disability on their rolls. As stakeholders, the parents were supported to write a letter to the higher authority regarding the needs of their children for a permanent caregiver in the school. Parents also took up other issues like cleanliness, hygiene and safety in school premises.
6. Diverse Opportunities Resources (DOR)

DOR is a process to improve the quality of life of adults with disability. Through this process, we also hope to create resources and links, so that dreams can become reality. The process is Rights based and ability focused.

In DOR, persons with disability participate in decision making of the day to day activities. A community meeting is held at the beginning of each week where everybody discusses issues related to the group, plan the week and the month ahead. Each of the activities also provides opportunities for capacity building in different areas like communication, relationships, social skills and other life skills. DOR members also celebrate many occasions together. Clubs and Events are the opportunities for adult members to learn life skills. In the year 2012-13, participation of members in all the clubs and events increased considerably from DOR and the walk-in services of the Care Plan Process.

Community Meeting

The weekly Community Meeting is the forum to initiate discussion on any activity, review the work done in the previous week and plan for the activities for the week ahead. The facilitator of the meeting ensures participation of all the members present. There are co-facilitators, whose role is to encourage members to share their views. The increase in the information level has given a lot of confidence to members to participate in decision making.

Clubs

Art Club
Art Club is a forum which gives opportunity to people with disability to express themselves through Art. Art Club is held twice a week. It also gives an opportunity to members to learn planning, organizing, communication and social skills. This year the focus of the Art Club was to learn different Art forms of India and set up an art gallery at AADI. The members visited different art galleries which gave them the confidence to visualize their own art gallery.

Hobby Club
Hobby club had started with stitching and embroidery and now it has evolved into a cooking club. Members of the club have learned to make various food items. To ensure participation and safety of members, an induction heater, slicer-dicer and different peelers were purchased. A wooden cupboard was so designed which can be opened easily by members using wheel chairs. The cooking club members learned to use a microwave at Sambhav Resource Center. Hobby Club also frequently bakes birthday cakes for DOR. Apart from cooking, other life skills like laying the table, washing one’s own plate, and winding up after cooking were also practised.

Gardening Club
Gardening Club is a seasonal club which functions from October to February. This year, the club had its own garden to look after. Two staff members which included the gardener and a senior manager became internal resources for the group. The gardening club members met regularly to plan and implement various activities. They
went to a nursery and bought new plants and planted them. They took pride in taking care of the plants. The gardening club decided to hold an inclusive flower show in the community. The club held a successful flower show at Vasant Vihar Club with participation from the members of the Vasant Vihar club as well.

**Music Club**
Members of the Music Club organized various activities throughout the year based on their interest which included learning to sing new songs, learning to play new instruments or playing musical games like variations of Antakshri, passing the parcel etc. The club members learned about folk music this year which was refreshing and energizing.

**Celebrations**
Celebrations are opportunities for the DOR members to use and further enhance the skills that they have learnt in various clubs. This year Christmas Party apart from enjoyment was also an excellent opportunity for practicing the skills of planning, organizing, communication and team work.

**Events**

*Art Exhibition-Kalakriti*
The members of the Art Club decided to have an exhibition of the art work that they had been doing in the Art Club which is held twice a week. The concept of Art Exhibition and Art Gallery was brainstormed with other members as well. The Art Club members then, visited different Art Galleries to get an idea about what an Art Gallery looks like. After these visits, they had a fair idea and participated in converting the old lobby into an Art Gallery. The entire planning and implementation for the Art Exhibition was done by the Art Club members. The participation in Kalakriti was expanded to the members from Care Plan service and AADI staff as well. The first Art Exhibition, Kalakriti, was inaugurated by Arpana Caur, a renowned artist on 13th Oct 2012, at Art Gallery in AADI.
**Winter Campaign-Sankalp**
Winter Campaign entered into its fifth year and was named Sankalp. This year, the membership of Winter Campaign was expanded to all staff members of AADI who volunteered to support the winter Campaign. The volunteers who had joined the Winter Campaign for the first time were given orientation and training by older members in the entire process from making inventory, sorting, mending, quality check, set making to packing. This year, the working team linked with Urban Forum for the first time, apart from linking with Ashray Adhikar Abhiyan and Aman Biradari with which there was already an association. The three organizations work with homeless people in Delhi. The Winter Campaign was to close in December but looking at the weather condition, the team decided to extend it up to end January to support the homeless people. The volunteers and the recipients of the clothes were interviewed. The campaign was closed by watching the video of the responses of the homeless people and the volunteers.

**Flower Show-Basant Sangam**
In the community meeting, the DOR team decided to do an inclusive flower show in the community which would ensure participation of people in that particular area. Vasant Vihar Club was chosen as the venue and Mr. Mittal was the link person from the club. Since it was the second experience of planning for the Flower Show, the participation of members had increased significantly. They were involved from writing the proposal to planning and organizing the show. The highlight of the event was an enthusiastic participation of Vasant Vihar Club members. One of the club members invited all the members to visit their garden.
7. Inclusive Opportunities

Inclusive opportunity is a process that ensures livelihood for people with disabilities through offering inclusive and accessible opportunities to all people. There is also a focus to explore employment opportunities through internships in & outside AADI.

Ujala
It is a unit where persons with disabilities produce block-printed the handmade paper products. It is a unit to raise awareness about capacities and abilities through the sale of paper products. It runs in collaboration with network of people with disability contributing in all aspects of product development from sourcing, manufacturing, packaging to marketing. The Ujala products are marketed through the Ujala Shop located at AADI, special orders and also through various Melas held at different corporate offices, colleges, other educational institutions across the year and SurajkundMela.

Special Orders
At Ujala, there is a facility for individuals/families to place special orders for hand-made block-printed paper products where customers choose specific blocks and design the printing. Sometimes, the individuals get blocks made for their company logos and then the block printing is done using that very specific block. The special order work includes deciding the size & color scheme for the product as well as choosing the block and the placement of the block. The special orders are received for Bags, Folders, Writing Pads, and Wedding Cards etc.

Participation in Melas
The invitation by different corporate offices, colleges, schools, NGOs and RWAs to put up Ujala Stall of block-printed paper products is an excellent opportunity for the public to interact with people with disability and see their capacities and abilities. This year Ujala participated in over 30 Melas at various corporate offices, NGOs, RWAs and schools/colleges. Some of the places where the Ujala stall and were put up are Surajkund Crafts Mela, AVIVA Life Insurance Co. India Ltd., Carriers Refrigeration & Air conditioning, Blind Relief Association and G.E. Capital amongst others.

Internships
Internship is an important aspect of the inclusive opportunity process. The aim of the internship is to provide an opportunity for people with disability to use their current skills and enhance their skills further to take them towards meaningful occupation and livelihood. The internship for each individual is planned keeping in view his/her areas of interest and abilities. Reasonable accommodations are done to remove any barriers that may impact the functional abilities/participation/learning of the person. Each person doing the internship is supported by an Internship Mentor whose role is to facilitate the process of learning and acquiring new skills.

Ongoing Internships at AADI

EPABX Board
The intern is learning the function of the board and the keys and remembers intercom numbers of 4 programme using those numbers (Careplan numbers, IO number, Sambhav number). He uses a head set to speak into. He has begun to practice the receiving of incoming calls. He can transfer the incoming call using the familiar intercom number.
Photocopy
The intern can switch-on and off the machine and clean it externally. He is learning to clean it’s parts. He can do back to back photocopy of any given set of papers of A4 size. He can match page numbers and put them into a set.

Finance
The intern is doing data entry using using Tally-2, which is then used by the finance department.

Store Inventory I
The intern takes out the finished Ujala products for monthly inventory, counts and puts back products independently. He takes out products from the almirah, matches the code from the stock sheet, counts the product and ticks the product after counting and puts them back. He counts finished products that are sent back from production on a daily basis. He is able to match the codes and read the names of the products in the list in Hindi. He writes the codes and the corresponding number of products on a sheet of paper.

Store Inventory II
This intern counts raw products that are sent to production for block-printing. He also counts the finished products for the monthly inventory, those which are to be sent to the Ujala shop from the store and for packing during mela. He knows the complete process for the store and can tell the persons supporting as to what needs to be done. He can work independently in the store provided he gets support for taking out the products from the almirah. He also needs physical support for counting. He can count above 100. He can self-correct himself if says the number wrong while counting.

Bulk Mailing
The intern is aware of all the steps of the bulk-mailing process-he takes the newsletter, puts it in the envelope, he cuts the address label from the label sheet using a scissor, sticks it on the face of the envelope. He stamps Book-Post above it, puts a stamp of AADI on left corner, tears postage stamp and sticks on the envelope. He also goes with the support staff to the post office to post the newsletters. The person needs support to count and say the grand total number of copies of the newsletter to be mailed. After getting the total requirement, he helps in putting together the list of things required for the mailing process, namely, envelopes, postage stamps, labels etc.

Newspaper Bags Making
Three interns are involved in the newspaper bag making who complement each other’s skills to complete the entire process.

Front-Desk Training
The intern is getting training in Front-Desk work which involves welcoming & greeting people as they come in asking them the purpose of visit and requesting them to make themselves comfortable while waiting for the team person to meet them for the first contact.

Purchase Training
This internship has given an opportunity for a member to learn social skills like talking to the shopkeeper, getting flowers/other purchases and delivering them to the right person.

Open Employment
The two persons with disability who got employed with AIRCEL in 2010 were working as customer care executives till March 2013.
New Internship and Placement Opportunities

Muskaan
In February 2013, a person with disability got a skill training opportunity in the stationery unit in Muskaan. He was on trial for two months and got the opportunity in different units, namely, masala unit, bakery unit etc. From April onwards, he began to get training in the Café located inside Muskaan. He is now undergoing internship and receives an internship allowance as well.

Vishal Megamart
An employment Opportunity opened up at Vishal MegaMart under the Udhav project. Three persons were interviewed at the Faridabad store. One of them has been recruited as a store assistant and is in the training period at the store.
8. Sambhav Resource Center

The resource centre is a project of National Trust in collaboration with AADI and Saarthak. Sambhav showcases assistive devices, hardware and software for persons with disabilities besides demonstrating concepts of Universal Design and independent living. In the three years since its inception in February 2010, almost 2500 visitors have come to Sambhav.

About 650 persons visited Sambhav this year. Many individuals with disability were given specific information related to various assistive aids. Parents were given training in the areas of educational aids, recreational aids, health and hygiene, dining, toilet, kids’ corner in Sambhav. Architectural students were introduced to the principles of universal design. Some visitors came from Japan to understand about work in the field of disability in India. Delegates from Afghanistan visited Sambhav to learn about reasonable accommodation and independent living in the disability sector. Professionals from Flair visited Sambhav to understand about Independent living and accessibility.

The resource centre is utilized by the teams in the care plan process for conducting assessments in various domains. It was also utilized for providing hands on training to six persons with disabilities in computer skills.
School of Rehabilitation Sciences

Under the new paradigm, a multi-tiered workforce is envisaged to address the human resource requirement of people with disabilities. The School of Rehabilitation Sciences, AADI’s training and research wing, plans to conduct programs for capacity building at the primary, secondary and tertiary levels to create sensitized and skilled human resource so that the needs of people with disabilities are met within existing services and structures in the community.

- Capacity Building for Disability Specific Professionals
- Capacity Building for Families of People with Disabilities
- AADI Staff In-Service training
9. Capacity Building for Disability Specific Professionals

During the year 2012-13, different training courses and modules were developed and conducted for both service providers within the community as well as for disability specific professionals. These programs were held both in the rural and urban areas. In addition, initiatives in capacity building for families of people with disabilities and capacity building for the staff were also conducted.

Post Graduate Diploma in Special Education (PGSE)

The second and final Semester for the batch 2011-12 began in January 2012 and ended in May 2012. Two students from the course dropped out in Semester II due to personal reasons making a total of 14 students in the course. Semester II included the 4 theory papers, Placement II and the Community Based Rehabilitation (CBR) Trip to Bodh Shiksha Samiti, Alwar, Rajasthan. Placement II was focused on giving students hands on experience in teaching and assessments. Students got an opportunity to plan and implement the lesson plans with children in regular schools. They also performed specific educational assessments for children with disabilities, under supervision. This year students went to Bodh Shiksha Samiti, Rajasthan as part of the CBR trip. The trip helped them to gain an understanding of child centered pedagogy, community involvement in education and the use of varied community settings and classrooms in the teaching-learning process for all children including children with disabilities. They visited different schools as well as got an exposure to community meetings and home visits. The 12 week internship was held in the months of July-September 2012. The 8 rotations were for varied durations from 1 week to 2 weeks depending on the learning objectives of that particular site. Students were placed both within AADI and outside AADI. The internship sites outside AADI included National Association of the Blind, National Association for Hearing Handicapped, Bodh Shiksha Samiti, Jeevan Jyoti, St. George’s School and Fr. Agnel School. The different rotations providing a wide and rich experience ranging from teaching with an inclusive framework in urban and rural schools; independently conducting the careplan process for a person with disability and their family including conducting specific assessments in the areas of early education and learning, subject specific assessments; understanding the impact of different impairments on functioning and participation; facilitating quality of life programs for adults with disability and practicing values at work.

All 14 students successfully completed the course and eight are currently employed within the field.

Valedictory Function: The Valedictory function for students of batches 2009-10 and 2010-11 of the Post- Graduate Diploma in Special Education and the Post-Graduate Diploma in Developmental Therapy was held in May 2012. The Pro-Vice-Chancellor (PVC) of Delhi University, Prof. Vivek Suneja was the Chief Guest. Ms. Shivani Gupta, Director, Access Ability, was a special guest at the function. The certificates were distributed to the valedictorians by the PVC and Ms. Shivani Gupta.

Advanced Course for Occupational Therapists (OT), Physiotherapists & Development Therapists (DT’s)

School of Rehabilitation Sciences launched the Advanced Course for OT’s, PT’s and DT’s in December 2012. This six month training program is of approximately 200 hours duration over the weekends. The first batch of 9 students completed the course in June 2013. This advanced course will enable the therapists to apply therapeutic principles within a rights’ framework. People trained will address both the impact that the impairment has on an individual (with a specific emphasis on health, mobility and self-care) and create enabling environments so that people with disabilities can
participate in their communities. This new course is based on the United Nations Convention on the Rights of People with Disabilities (UNCRPD), ratified and adopted by India in 2007.

The different components of the course include an understanding of Human Rights, Inclusion Participation; International Classification of Functioning (ICF) and the impact of impairments based on ICF classification; an understanding of evolving capacities of people and developing care plans in participation with people and their families, specific assessments in the areas of mobility, self-care, an introduction to the newly developed mobility and self-care assessment tools; identification of physical, social and attitudinal barriers in the environment and the impact on health, mobility, self-care and participation of the person; physical and social audit tools; developing comprehensive intervention plans including challenging barriers; applying therapeutic techniques at an advanced level- debates, ethics and applicability and identifying and responding to risks and situations of crises.

The course follows a participatory and discussion based methodology with practical training and hands-on experience in the use of various assessment tools and implementation of intervention plans. The course has each trainee working with a resource person during different times in the course and learning from their personal experience of disability. Sustained interaction and feedback from resource people has enabled the trainees to understand and appreciate the nuances of facilitating participation and decision making.
10. Capacity Building for Families of People with Disabilities

Training for Parents of Children in the 0-6 years Age Group

During the early years, it is essential to support parents to understand the needs of their children with disability being similar to all children, disseminate information on the impact of the impairment as well as the impact that the various barriers in the child’s life may have on participation and inclusion. This is a time when parents are faced with many questions regarding their child and often have many misconceptions related to disability in general and the impairment in specific. Although information is shared with parents during individual sessions, the need was realized to get the parents together in this age group to share their experiences with each other and openly discuss and engage in a two-way sharing of information with the staff. It was also felt that domain specific trainings such as in the areas of self-care or communication for parents would be beneficial. This year 4 parent training modules for different domains for this age group were developed. The training modules include an initial 2 day session on building perspectives.

Over the course of 3 different training sessions, 35 families participated. Of these 35, all families were invited to participate in the specific trainings on facilitating admission into school; communication and behavior and self-care. The specific trainings were attended by 6, 9 and 10 families respectively. Parents shared that they found the training useful and benefited from the opportunity to meet and interact with other families.
11. In-Service Capacity Building for AADI Staff

Over the year, different modules for capacity building of technical and non-technical AADI staff were held within AADI. There were various trainings that were undertaken to build the understanding and capacities of the staff while aligning them to the values of the organization. Some of the internal trainings undertaken were:

- Hospitality training for support staff (30) to share a common value and culture at work
- Training for all program staff (70) on the resources available at Sambhav, the National Resource Center, to provide reasonable accommodations for persons with disabilities while also understanding the importance of technology in improving the quality of life
- Twenty senior staff were trained in interviewing skill to use the questionnaire for inclusion so that the staff would be able to get the relevant information to identify the gaps in the education system and the support required
- Twenty five urban and rural staff were trained to use the tool for identifying persons with disabilities, the resources available and resource gaps during the survey undertaken of 10 semi-urban villages of Ballabgarh district to design service delivery
- A two day training was undertaken for 40 staff members across all levels to prepare the staff to move into urban community work and mapping needs, resources and barriers in the environment
- A 2 day perspective building exercise was undertaken for all staff members in the context of UNCRPD and understanding the vision of AADI as well as the way forward
- Training was organized for the Knowledge Management Team on the importance of planning and documentation as well as time management.
- A number of staff participated in different trainings, conferences and seminars held outside AADI.

These included:

- 2 members participated in the National Stocktaking Convention on the RTE Act addressing the issues of systemic readiness and redressal under RTE, community participation, Teacher Issues, Inclusion under RTE, Privatization of education, Quality of Education and the way forward.
- The National Consultation on ‘Internet Rights, Accessibility, Regulation and Ethics’ organized by the Digital Empowerment Foundation was attended by 1 person.
- People’s Budget Initiative organized the National Convention on Union Budget 2013-14 was attended by 1 person. The conference discussed priorities for critical and disadvantaged sectors as well as public policy issues.
- The Indian Seating and Mobility Symposium organized by Specialized Mobility Operations and Innovations (SMOI) was attended by a staff member and 2 people with disabilities. The conference exposed participants to a number of seating issues and concerns and gave an understanding of what appropriate seating must entail. There was also an exhibitor’s workshop where different seating and mobility solutions were displayed.
- One staff member participated in the 2 day CBR world congress held in Agra.
- Two staff members attended a training organized by Deloitte Center for Leadership and Community on Process for writing a Proposal.
- School of Inspired Leadership (SOIL) organized an HR forum on ‘Infusing Innovation in HR through Indian Thought Leadership: Convergent and Divergent Perspectives’. This was attended by two staff members.
- TRANSED, an international conference on mobility and transport for the elderly and disabled was held from 18th-20th Sept. It was attended by 7 people from AADI including 3 people with disabilities. The focus was to understand the issues related to safe and effective multi modal
public transport for people with various disabilities in both urban and rural contexts. There was a poster exhibition related to travel and transport and an exhibition of products which can facilitate easier mobility.

- Two staff members from AADI attended a workshop on Data Dissemination organized by the Department of Census Operations, New Delhi. AADI participated in the training of enumerators in Delhi state before the census 2011. It took the lead in organizing and conducting training of all enumerators in Delhi in collecting the disability data by sensitizing as well as informing them about the different issues involved. This particular workshop was organized for participating NGOs as well as selected members from different government departments to teach them the features of the new software for accessing data and how to use it to access the data.

- Media Lab Asia (MLA) is interested in developing an android based voice output software for people with communication difficulties. They approached AADI for support and it was proposed to work together in a more holistic manner and develop a proposal with AADI as the technical consultant on disability, with MLA as the implementing agency. A draft was developed after elaborate discussion between the relevant senior staff of both the organizations. It was decided that MLA will get back after internal discussion, fine tune the proposal and it will be finally presented to National Trust for funding. A response from MLA is still awaited.
Advocacy, Policy and Research

- Twelfth Plan Work
- Rural Community Based Rehabilitation Survey
- Study on Integration in education
- Awareness Raising and Sensitizing programs
12. Twelfth Plan (XIth Plan)

In an effort to bring the neglected needs of people with disabilities in the forefront in the XIth Plan, the disability sector has been actively involved in advocacy with the Planning Commission. The effort has been two-pronged with a focus on directly strengthening recommendations from the Ministry of Social Justice and Empowerment as well as influencing priority ministries such as Health and Family Welfare, Human Resource Development, Labour and Employment and Rural Development. As a result of these efforts, the sector got representation on the Steering Committees of various sectors. These included Social Justice and Empowerment, Health and Family Welfare, Ayush, Transport, Human Resource Development, Labour and Employment, Youth Affairs and Sports and Women and Child. People representing the sector were either professionals or people with disabilities who are experts as users of the service. During the Steering Committee meetings, detailed recommendations were sent to each of the sectors individually. On analysis of the reports of the Steering Committees, it was found that despite the representation, there was little mention of people with disabilities in the final recommendations of the Steering Committees.

The advocacy efforts continued and a meeting was held between Dr. Montek Singh Ahluwalia, Deputy Chairman of the Planning Commission and representatives of the disability sector. It was advised that all recommendations be collated and Shri Narendra Yadav be the nodal member to receive and forward the recommendations to concerned members.

In the Report of the XIth Plan Working Group on “Empowerment of Persons with Disabilities” the Ministry of Social Justice and Empowerment had identified 37 ministries/departments as being concerned with disabilities. Of these, 9 Ministries were selected by the disability sector as priority ministries where a focus on people with disabilities was essential.

These 9 ministries were of Civil Aviation; of Communications and Information Technology; of Health and Family Welfare; of Human Resource Development; of Labour and Employment; of Panchayati Raj; of Railways; of Rural Development and of Women and Child Development.

Detailed recommendations for these 9 Ministries were given to Shri Narendra Jadhav on 4th May 2012.

A detailed analysis of the inclusion of recommendations of the disability sector for these 9 ministries in the draft document of the XIth Five Year Plan was done. The results show that most sectors mention disability only in passing and do not include any significant recommendations. It is surprising to note that although many sectors state that their plans are aimed at targeting the most vulnerable sections of the population; people with disabilities are not included in their definition of most vulnerable sections and are thus excluded from any specific provisions.

Some of the key suggestions for each Ministry, such as setting up of a Disability Unit to launch and implement all disability related schemes under that ministry and a 3% budgetary allocation towards expenditure on disability for each ministry, find no mention in the Plan. Detailed steps for further advocacy to address these major gaps are being worked out.
13. Rural Community Based Rehabilitation Survey

A survey was done in 8 villages and 2 urban colonies by 8 teams, with the objective of identifying local resource persons for fulfilling the needs of persons with disabilities. Each team comprised of a staff member each from the rural and the urban area.

In this survey, the village mapping was done where information regarding history, culture, routine, strengths, weaknesses, threats, risks etc. was collected through talking to various groups directly. New resources were identified and existing ones updated. The information about existing number of persons with disabilities in villages was also collected and home visits were done with local resource persons like Aanganwadi workers, Asha workers, Panchyat members etc. to take information regarding their needs and existing barriers coming in the way of fulfilling the needs and rights. Information collected during this activity will help to plan the future strategies for the Rural Programme.

14. Study on Integration in education: Perspective of students with disabilities

Policies in India have supported integrated education in the general education system and education of children with disabilities through various schemes of the MSJE for special schools. Recently however the support for inclusive education has been rapidly increasing in India as evident in SSA, the recent RTE Act and the ratification of the UNCRPD by India.

Even though the policy outlook has been progressive, the reality at the ground level is that people find it was difficult to change long held beliefs and practices which they find convenient. It was the belief, that the impetus for change will come from the voices of first right stakeholders. These voices were recorded, that motivated AADI to undertake a research study to highlight the experiences of persons with disabilities in mainstream educations systems.

AADI team interviewed 200 persons with disabilities from the rural and urban contexts with the aim of describing the educational experiences of people and to determine the barriers and the facilitators in the schools they attended.
15. Awareness Raising and Sensitization Activities

a. The Republic Day Tableau 2013

AA DI was entrusted with the conceptualization and the implementation of the Republic Day Tableau, 2013 of the Department of Disability Affairs, of the Ministry of Social Justice and Empowerment. The inclusion of a tableau in the parade was considered an important awareness raising opportunity at the national level. The theme chosen was Inclusion, Empowerment and Accessibility. The tableau portrayed persons with disabilities as proud citizens of the country enjoying all human rights and fundamental freedom in an inclusive society.

The tableau showcased cultural inclusion through a live cultural program, by an inclusive group of participants (belonging to a Disabled Persons Organization) who enthusiastically performed to an original song “pankhon mein aakash samete chale hamara kafila,” carrying a message of solidarity.

A sculpture, on the side of the tableau depicted inclusion in creative arts. Inclusion as citizens was represented through a picture of a woman holding different identity cards symbolizing equality between all. The tableau carried the message that the needs of persons with disabilities were the same as of others and this was represented by portraying the symbols of the various sectors like health, education, sports, recreation, religion, financial services etc. on a revolving rubik cube.

Accessibility found a wider meaning when the tableau not only showcased physical accessibility through a ramp but also in communication and public information systems through use of Sign language interpretation, Braille, Disability signs and symbols. Words from the Constitution of India, ‘equality’, ‘fraternity’, ‘justice’ and ‘liberty’ written in Braille and Sign Language sent out a powerful message. Mural paintings depicting achievers and a sculpture of a diversity of people including persons with disabilities moving forward, holding the National Flag symbolized empowerment.

Experiences shared by participants

Pradeep Raj: “It was a moment of great honour. What I liked best was the tableau carrying the message that needs of persons with disabilities are the same as others. This got represented by a revolving Rubik’s Cube portraying inclusion through symbols of various sectors like health, education, sports, recreation, religion, financial services etc. The team also got a chance to go to Rashtrapati Bhavan and meet the President of India, Shri Pranab Mukherjee. We felt very happy.”
Pragya Ghidiyal: “The month long rehearsals for the Republic Day gave me a chance to get away from my daily routine. I felt inspired being part of the energetic and happening practice sessions. Everything was so well organized by AADI where we used to do our rehearsals. On the day of the parade, performing in front of the President of India, the Prime Minister, the foreign Chief Guest and thousands of viewers made me feel very proud.”

Suvarna Raj “We worked very hard during the rehearsals. I realized that hard work, determination and positive thinking can help us achieve a lot in life. I look forward to many such opportunities.”

b. Badhte Kadam IV

AA DI, as the State Nodal Agency (SNAC) for National Trust, organized the fourth Badhte Kadam national flag off, on 3rd November, 2012. Badhte Kadam is a nationwide ‘Disability (Discoverability)’ awareness raising campaign to celebrate diversity; to create more opportunities for participation in the community for persons with disabilities; encourage more responsibility from the community for persons with disabilities and their parents regarding their rights; and empower persons with disabilities to access National Trust and other governmental schemes. This year the theme of the Campaign was ‘Cultural and Social Integration of People with Disability’. The focus of the various activities was to reach the unreached areas like Block/Taluk & Panchayat level, in addition to the districts.
On 3rd Nov 2012, the Hon’able Minister Prof. Kiran Walia, Minister of Education, Women and Child Development, Social Welfare and Language, Delhi Government flagged off the Badhte Kadam IV to the beat of BK IV song at AADI, with around 400 participants cheering and joining in the gaiety.

The flag-off was attended by Smt. Stuti Kacker, Secretary, and Department of Disability Affairs, the Chairperson of the National Trust Mrs. Poonam Natarajan and the board members of National Trust and many officials from the Ministry of Social Welfare. The event saw a wide participation of children from various Government schools, Principals, the District Education Coordinators, persons with disabilities, NGO partners like AFA, Muskan, Society for Child Development, Prabha, Samadhan, Deepalaya, Aastha, Media persons and the National Trust and AADI staff.

c. Badhte Kadam IV: Delhi -State Level Activities

In Delhi, all the 9 LLC NGOs of National Trust in collaboration with other NGOs, held various programmes under the campaign to increase awareness and make the city more accessible to the disabled.

In order to spread awareness in the community, AADI had put up an interactive desk at Chattarpur, to sensitize the residents of Chattarpur Gaon about the needs and rights of person with disabilities. A range of activities and games were planned to make the sensitization process interesting and engaging for the residents. The activities included communicating using gestures, pictures; writing your name without using hands/ painting using a helmet that has a paint brush; wearing a sock using one hand and many more similar activities. There were handmade as well printed posters from National Trust that showed the need for inclusion of person with disabilities in areas of education, relationships, use of public transport etc.

The interactive desk attracted a lot of school children who participated enthusiastically. They discussed about how children with disabilities have the right to go to school, participate in
d. Sensitization Training for Railway Porters

As part of World CBR Congress held in Agra in November 2012, a module for sensitization of Porters within the New Delhi, Hazrat Nizamuddin and Agra Cantontment railway stations was designed and conducted. The need for this sensitization was realized because a large number of people with disabilities were expected to travel, from Delhi to Agra at this time through the railways. The objective was to help porters interact with and assist persons with disabilities in an effective manner. Approximately 1500 porters were sensitized due to this effort.

The teams conducting the training included people with visual, hearing and mobility impairments, giving an opportunity for persons with disabilities to share about their own experiences of using the railway stations. The trainings served as an eye opener for the team of trainers as well as the porters as they both got to know of difficulties faced by the other at the station. Porters listened with rapt attention to both the experiences and the suggestions of persons with disabilities about ways in which they would like to be assisted.

![Image of sensitization training for railway porters]

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e. Delhi University Higher Education Faculty Sensitization

As part of the linkage with Delhi University’s Centre for Professional Development in Higher Education (CPD-HE), SRS conducted 3 different sensitization programs within CPD-HE’s existing refresher and orientation programs. These programs train faculty from different colleges from different parts of the country. Approximately 100 faculty members were given a basic orientation into the needs and rights of people with disabilities and a framework for addressing the needs of students with disability within their own colleges.
f. AADI Newsletter (English: News & Views /Hindi: Samachar Vichaar)

As part of the initiative in awareness raising and creating different platforms for inclusive expressions, the AADI newsletter, titled ‘News & Views’ (in English) and ‘Samachar-Vichaar’ (in Hindi) was launched in October 2012. The newsletter is a forum for different people to share their thoughts and expressions about what has touched their lives and what they think has shaped their journey. The idea is to give voice to varied experiences and realities, of people who believe that everyone has a right to lead a life of dignity with purpose. The newsletter also shares the news on events and activities at AADI along with latest developments in the field.

The inaugural issue saw an inclusive team of 8 people come together as the editorial team to brainstorm as to what shape the newsletter would take and to carry out the different tasks involved in the production of the newsletter. While working together on the inaugural issue the team discovered the satisfaction in realizing their own abilities both individually and collectively. It called for the team to work with different members, appreciate each other’s skills and learn to apply their own skills to newer areas of work such as conceptualizing, editing, translating and designing. Wherever resources from outside the editorial team were needed, an effort was made to provide opportunities to people with disabilities.

It was decided that the main mode of circulation for the newsletter should be through soft copies, in time with the objective of being environmentally friendly. An effort was made to ensure accessible formats and versions of the newsletter in English and Hindi print, Braille. For the print versions, accessibility guidelines such as font size, justification and spacing were followed by the team.

Although some contributions in the newsletter seem personal, they are in reality, compelling accounts of a majority of persons with disabilities who continue to be marginalized and excluded from the community. Their personal experiences are used as a medium to disseminate information and spread awareness about the United Nations Convention on Rights of Persons with Disabilities.

The second issue of the newsletter is scheduled to be released in April 2013.
Financial and Human Resources

- Financial Statements
- AADI Staff List
- Governing body of AADI
# Financial Statements

## SUMMARY OF AUDITED INCOME & EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31ST MARCH 2013

<table>
<thead>
<tr>
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<tbody>
<tr>
<td></td>
<td>Rupees (in Lakhs)</td>
<td>Rupees (in Lakhs)</td>
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<td><strong>TOTAL :</strong></td>
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<td>Amount transferred to Earmarked Fund</td>
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Compiled from the Audited Financial Statements of the Society
For CHANDIOK & GULIANI
(CHARTERED ACCOUNTANTS)
FRN No. 001199N For Action for Ability Development & Inclusion
V.K.LALLA SECRETARY / EXECUTIVE DIRECTOR
(PARTNER) M.No. 80847

## SUMMARY OF AUDITED BALANCE SHEET

### AS AT 31ST MARCH 2013

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<tr>
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</thead>
<tbody>
<tr>
<td></td>
<td>Rupees (in Lakhs)</td>
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<td><strong>TOTAL :</strong></td>
<td>1366.32</td>
<td>1370.33</td>
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</table>

Compiled from the Audited Financial Statements of the Society
For CHANDIOK & GULIANI
(CHARTERED ACCOUNTANTS)
FRN No. 001199N For Action for Ability Development & Inclusion
V.K.LALLA SECRETARY / EXECUTIVE DIRECTOR
(PARTNER) M.No. 80847
Place: New Delhi
Dated: 14th November,2013
AADI Staff (As on March 2013)

Executive Director: Gidugu Syamala

Deputy Executive Director: Madhu Grover  Director: Renu Anuj

Managers / Coordinators of Activities

Rehabilitators (Associates)

Administration, HRD, Finance & Resource Mobilization Staff (Urban)

Manager/Coordinator of Activities
- R. K. Sahani  Gavender Kumar  Seema Ghosh  M.S. Sridhar

Associates / Asst. Executive Officer
- Harpreet Mehta  Saranjeet Kaur

Assistants
- *Dolly Das

Secretaries / Telephone Operator
- Meenakshi Sharma  Nisha Sawhney  Rajeev Uppal  Yuna Noor  Vinay Viz

Jr. Assistants / Receptionist
- Muthu Subramaniam  Neena Sharma  Pankaj Kapoor  Sanjay Sharma  Uttam Mandal  Chetan Razdan  Atul Mohan Mehta  Gurucharan Singh

Non-Technical Staff

* Left during 2012-2013

Rural Centre at Dayalpur

Rehabilitators, Support Staff and Volunteers

* Left during 2012-13
Governing Body of AADI

Chairperson
Mr. Sunil Mehta
B. Com. (Hon.), (Delhi University)
Chartered Accountancy, (Institute of Chartered Accountants of India, Delhi)
Alumni, Wharton School of Management, (University of Pennsylvania) U.S.A
Country Head & CEO, American International Group (AIG) Inc. India
President, Indo-American Chamber of Commerce

Vice Chairperson
Ms. Vandana Bedi
Dip. OT (IPH, Delhi)
P. G. Course in Management of CP
M. Sc. Occupational Therapy – Pediatrics (UK)
Consultant (Disability & Development)

Treasurer
Mr. Rajesh Kathuria
Chartered Accountancy (Institute of Chartered Accountants of India, Delhi)
Practicing Chartered Accountant

Secretary & Executive Director
Ms. G. Syamala
M.A. Psychology, (Delhi University)
P.G. Diploma in Special Education (AADI)
Executive Director, AADI

Members
Dr. Divya Jalan
Founder Member
Dip. Physical Handicap (London University)
M. A. Early Childhood Education (London University)
Ph. D. Education (SNDT, Mumbai)
Consultant (Education)

Ms. Sushmita Nundy
Founder Chairperson
B.A. (Hon.) (London School of Economics)
M. Phil. (Jawaharlal Nehru University, Delhi)
Founder Chairperson, AADI

Mr. Alok Sikka
B.A. (Delhi University)
Post Graduate Diploma in Journalism
Journalist

Ms. Shukla Haldar
M.A. Fine Arts, (University of Chennai)
Diploma from London Montessori Centre (Kolkata)
Chief Facilitator, Panchatantra Montessori School

Dr Achal Bhagat
MBBS(UCMS, Delhi), MD (Psychiatry), PGIMER, Chandigarh,
MRCPsych, Royal College of Psychiatrists, UK
Director, Division of Mental Health & Quality of Life, Medanta
Chairperson, Saarthak
Chairperson, SRS, Governing Body

Mr. Rajesh Thadani
B.Sc.(H) Botany (Delhi University)
M. Sc. Environment Sciences (Jawaharlal Nehru University, Delhi)
Masters of Forest Science (Yale University)
M. Phil, PhD. Forest Ecology & Mgmt (Yale University)
Executive Director, CEDAR

Ms. Kamla Bhasin
M.A (Economics) Rajasthan University
Advisor, SANGAT

Dr. Mathew Verghese
MS Orthopedic (Surgery)
Director, St. Stephens’ Hospital

Ms. Veena Kumar
M.A. English ,(Kanpur University)
Volunteer, Resource Mobilization

Mr. Praveen Kumar Gurunath
MSW, (Community Development )
Programme Manager , VSO

Ms. Seeta Sharma
B.A. (Hon.) Geography, (Delhi University)
M.A. (Hon.) Geography, (Wollongong University Australia)
Regional Program Officer – Asia, Dan Church Aid

Ms. Madhu Grover
M.A. Psychology ,(Delhi University)
P.G. Diploma in Special Education (AADI)
Deputy Executive Director, AADI

Ms. Renu Anuj Singh
M.Sc. (Agra University)
P.G. Diploma in Special Education (AADI)
Director, RCBR
Action for Ability Development and Inclusion
2, Balbir Saxena Marg, Hauz Khas, New Delhi-110016
Tel: 26569107, 26864717
Fax: 26853002, Email: aadi@aadi-india.org
Website: www.aadi-india.org

Rural Community Based Rehabilitation Centre
Dayalpur Primary Health Centre
Ballabgharh Block, Faridabad (Haryana)