Annual Report of the Resource Centre for children with Disabilities
Period: September 2012 to June 2013

Introduction

The very fact that RTE that came into effect in April 2010 includes children with disability in its purview, has strengthened our belief that mainstream schools are the most appropriate and legitimate place for all children to get education. Exclusion/non-inclusion is a violation of their rights.

The organization recognizes disability as human rights issue and focuses on INCLUSION. We cannot achieve inclusion by only Setting up parallel structures such as special schools, homes and sheltered workshops for people with disabilities.

At the level at which our schools are functioning at the moment, especially after the implementation of Right to Education Act, much change is required to include children with different impairments in a classroom. In Delhi it seems to us that we have not explored even the basics of inclusive practices. There are no formal systems of early childhood rehabilitation and habilitation strategies that can support the child living in poverty to get to the school system. There are also children who do have high support needs and multiple impairments.

The organization focuses on community mobilization and strengthening of community groups. It has been using the strategies of community mobilization, Advocacy, research and critiquing of policies, information and knowledge exchange and working in partnership with the community to achieve its aims. The organization has been working in the community, building understanding and knowledge, linking people to action and resources so that they can advocate for their own rights. Apart from this, the organization has been partnering with the education system to ensure inclusiveness, hence a better quality of education.

The purpose of starting this Resource Centre was an extension of AARTH-ASTHA’S commitment to strive for equal opportunities for children with disabilities as the rest of the children in the mainstream schools.

Keeping in mind that basic education and a simple approach to holistic development, as mentioned in the introductory part, is the fundamental right of every child, an attempt is being made to counter some of the challenges that our children with disabilities are likely to face.

Inclusion of children in the community systems (in this case the mainstream schools) involve preparation at child’s level, parents level and at the school level. Typically ASTHA (Now AARTH-ASTHA) works with children with disabilities especially with children requiring intense intervention.

- In their homes in partnership with parents to build mobility, self help & communication skills, to support families to obtain medical, any specific assessments
or training for hearing & vision, aids & appliances, schemes such as disability certificate, disability stipend. This is done by AARTH-ASTHA’s community staff, Key Workers. Each key worker has a specified number of children. Some key workers are well trained by AARTH ASTHA over the period and some are being on the job training.

- In schools, constantly sensitizing teachers & school authorities to the needs of children with disabilities, supporting teachers with strategies & teaching aids for enabling children with disabilities to access quality education.

- In AARTH-ASTHA run child right centres in the hearts of communities with other marginalized, but non disabled children for providing experience of inclusion, reinforcing communication, social & cognitive skills and for providing the understanding of their rights.

- At parents and community level, conducting regular meetings with parents & community members, enabling them to form focus groups, linking them to other community networks and thus enabling them to access their children’s right to education.

However, inclusion of children required much more focused work in terms of creating resource, technical intervention by professionals as preparatory measures and for preventing from drop out. Hence the programme was conceptualized to provide intense technical intervention to develop cognitive, social, communication skills amongst identified children with disabilities for a required period that varies from child to child.

**Objectives**

Two major objectives of this programme are:

- To prepare the children with disabilities and their families for mainstream school
- To support the children with disabilities who are already in school for inclusive education by identifying and minimizing the barriers faced in education

**Strategies**

**Selection of children for training at Resource centre**

Each child with disability are holistically assessed by their respective key workers of the child at the community level using the assessment tool that was developed by AARTH-ASTHA for the community level workers. The tool has enabled the community workers to screen the children with disabilities for specific trainings and input. The children thus identified are enrolled in the programme after much discussion with the parents on the course of action, duration of their stay in the programme, the follow up action and their commitment towards the programme for their chi
**Impact:** Increasingly parents with children below 6y have also shown interest in sending their children to Resource Centre for readiness programme.

**Grouping of children and timings for intervention**

**Grouping of children**

The children are grouped on the basis of the following criteria:

- The children who are getting prepared for entry into school
- The school going children attending morning shift in their respective schools
- The school going children who are attending afternoon shift in their respective school.

During the period under evaluation there were **three groups**, one in the morning and two post lunch.

**Timings**

Two timings were identified: One in the morning and one post lunch. The children who are getting prepared to enter the school & children who attend afternoon shift, come in the morning, and children who attend morning shift in their schools come for the post lunch session.

The duration of each session is 2 hours. The two hours are structured in such a way to provide individual and group sessions.

**Working with children in groups**

In the group sessions, the topics are picked up from the school text books from environmental studies and language, the creative activities are designed in such way to enrich each child’s experience through their active participation. Several visuals were collected from various sources apart from the text books. This also included collecting relevant visuals and films from net and other sources. Some topics

- Body parts
- School life
- My family
- Personal hygiene
- Grooming
- Summer season
- Wild Animals

**Impact**
All topics were relevant for all children both school going and non school going children. Eg. the activities conducted under the topic ‘School life’, it enabled the non school going children to get familiar about several aspects of school. And for children going to school, their awareness on various aspects such as their teachers, friends’ name improved. The skill of seeking information could get instilled in children.

Through the activities connected with topics: grooming and personal hygiene, the children not only understood their importance, but also learnt to practice in their own life. To facilitate and strengthen the behavior, each child had a personal grooming kit at the centre and they used their kit to remain clean and tidy.

From the activities on my family, the children understood and learnt to appreciate the relationships

The activities related to summer provided them opportunity to recall activities that they enjoy doing in summer, to express their concerns related to issues such as water shortage, erratic power supply, illnesses, to learn more about summer fruits, vegetables, importance of using them and preventive measures from health problems.

Apart from the activities of enrichment, the social and communication skills were practiced regularly through meeting-greeting, eating together and games activities.

**Working with children individually**

In every session certain duration of the sessions were allotted to look into individual needs of each child that will reduce the barrier and enhance the enablers to inclusive education. The needs varied from changing the challenging behavior, developing suitable modes of communication, identifying appropriate learning strategies, supporting parents to get mobility aids to advocating with education department for implementation of schemes to provide the children their due rights.

**Some success stories**

**Story of Subista - Breaking problem behaviour**

Subista is a 12 year old girl with multiple disabilities. Due to difficulty in expression and hyperactivity, Subista came across as a stubborn, disruptive and distracted child. She would engage in hitting other children and constantly wandering off from the place. This posed a lot of concerns to the mother. This also was a major reasons for school to deny admission. Systematic training at Resource Centre has now enabled her to engage in a small group of children & individually without the mother having to be present with her all the time. She is also able
to sit in her designated place for half an hour at a stretch and engaged in her own created activities.

**Story of Pushkar- working towards easy communication**

Pushkar is an intelligent child with cerebral palsy. His physical, communication and behavior challenges were the main barrier for his inclusion in the school. Pushkar also comes from a caring but over protected family. Regular attendance to Resource centre and ample opportunities, through games & other art activities, gave him adequate opportunities for him to interact with other children. Fulfillment of his social needs had a positive impact on his behavior. He began to cooperate well in the academic sessions. To overcome his inability to communicate verbally & his inability to write due to difficulty in the fine motor movements, the special educator devised communication board of suitable size for him to point out answers. Several theme boards were made for his participation in the group activities. The number board has been the most successful one.

Besides these, the graded worksheets have been the most successful strategies for the children who are either slow learners or have intellectual challenges.

A **TABLE SHOWING TOTAL NUMBER OF CHILDREN WORKED WITH, AND CURRENT STATUS:**

<table>
<thead>
<tr>
<th>S.No</th>
<th>Name</th>
<th>Age/ Gender</th>
<th>Disability &amp; challenges</th>
<th>Month of entry</th>
<th>School status</th>
<th>Current Focus</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Priya</td>
<td>10y/F</td>
<td>Cerebral Palsy with Spastics quadriplegia. Non verbal and wheelchair user</td>
<td>July 2011</td>
<td>Continuing Admissions done. But not going to school</td>
<td>Priya has got admission in school. She is very keen to go. Father is a disabled person. Mother with another young child at home, is not able to take her to school. AARTH-ASTHA along with parents have filed an RTI with Education department to find out on the status on transport scheme for children with disabilities. The reply is yet to get.</td>
</tr>
</tbody>
</table>
The key worker continues to work at home on therapy, education and self help skills. Has not been able to come regularly to Resource Centre. But comes for all major events, outings.

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2.</td>
<td>Pushkar</td>
<td>8y/M</td>
<td>Cerebral Palsy with spastics quadriplegia. Non verbal and a wheel chair user.</td>
<td>July 2011</td>
</tr>
<tr>
<td>3</td>
<td>Rohit</td>
<td>8y/M</td>
<td>Slow Learner</td>
<td>July 2011</td>
</tr>
<tr>
<td>4</td>
<td>Bhoomi</td>
<td>7y/F</td>
<td>Cerebral Palsy with vision problems. Bhoomi is non verbal, wheel chair user.</td>
<td>Augst 2011</td>
</tr>
<tr>
<td>5</td>
<td>Sudip</td>
<td>9/M</td>
<td>Aarskog Syndrome Independent walker, non</td>
<td>Augst 2011</td>
</tr>
<tr>
<td>No.</td>
<td>Name</td>
<td>Age</td>
<td>Gender</td>
<td>Condition</td>
</tr>
<tr>
<td>-----</td>
<td>-----------</td>
<td>-----</td>
<td>--------</td>
<td>-----------</td>
</tr>
<tr>
<td>7.</td>
<td>Neha</td>
<td>12y/F</td>
<td>Slow learner Independent in all the basic daily living skills, academically far below her class.</td>
<td>July 2011</td>
</tr>
<tr>
<td>8.</td>
<td>Sonia</td>
<td>12y/F</td>
<td>Intellectually challenged, verbal, hyperactive, independent walker.</td>
<td>July 2011</td>
</tr>
<tr>
<td>9.</td>
<td>Kulsum</td>
<td>15y</td>
<td>Progressive vision loss.</td>
<td>August</td>
</tr>
<tr>
<td>No.</td>
<td>Name</td>
<td>Age/Gender</td>
<td>Condition</td>
<td>Date</td>
</tr>
<tr>
<td>-----</td>
<td>--------</td>
<td>------------</td>
<td>--------------------------</td>
<td>------------</td>
</tr>
<tr>
<td>10</td>
<td>Vikas</td>
<td>11y/M</td>
<td>Clubbed feet</td>
<td>Jan 2013</td>
</tr>
<tr>
<td>11</td>
<td>Mohit</td>
<td>7y/M</td>
<td>Cerebral palsy, Spastics diplegia Walks with support, verbal</td>
<td>Jan 2012</td>
</tr>
<tr>
<td>12</td>
<td>Muskaan</td>
<td>.../F</td>
<td>Low vision</td>
<td>Jan 2013</td>
</tr>
<tr>
<td>13</td>
<td>Subhista</td>
<td>9y/F</td>
<td>Cerebral palsy with Mental retardation</td>
<td>July 2012</td>
</tr>
</tbody>
</table>
herself in activities without adults supervision if the activities interests her. Though the school has admitted her, but they insist that mother stays with her. Without the mother the school is not willing to keep her in school.

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td>Sandhya</td>
<td>9y/ F</td>
<td>Downs syndrome Walker, limited verbal communication &amp; social skills</td>
<td>July 2012</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Admitted in class 1 Going to school with keen interest</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Sandhya is being currently assessed on communication, social and cognitive skills. Sandhya is able to answer to questions in one or two words. Though limited verbal output on her own, is able to repeat several words. Shows interest in crafts work, in picture reading. She points to a few common pictures when named. Scibbles within boundary. Snatching and hitting have reduced considerably.</td>
</tr>
</tbody>
</table>

| 15 | Manthan | 7y/ M | Cerebral Palsy, Spastics diplegia Wheel chair user, non verbal | July 2012 | Has stopped coming since January 2013 |
|   |   |   |   |   |
|   |   |   |   | Not admitted in school |
|   |   |   |   | Focus on assessment in academic, social and communication, while he has been getting training on motor and daily living skills at home. Manthan’s grand father has not been able to bring Manthan up to the stop as manthan’s sister has not been keeping good heath. Manthan’s old grand parents are the main care takers of the Manthan and his two disabled siblings. |

<p>| 16 | Himanshu | 6y/ M | Down syndrome Non verbal, Walks with support | January 2012 | continuing |
|   |   |   |   |   |
|   |   |   |   | Not admitted in school |
|   |   |   |   | There is a visible change in Himanshu. He recognizes all familiar people. Willing to work with others. Attends to simple table top activities such as playing with educational toys in imitation, looks in to books, points to familiar pictures when named and scribbles holding pencil appropriately. The parents are yet not ready to send him to school. |</p>
<table>
<thead>
<tr>
<th></th>
<th>Name</th>
<th>Age</th>
<th>Gender</th>
<th>Condition</th>
<th>Grade</th>
<th>Attendance Status</th>
<th>Reasons for Non-Attendance</th>
<th>Additional Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>Prince</td>
<td>8y/ M</td>
<td></td>
<td>Cerebral Palsy with intellectual challenges and vision problem</td>
<td></td>
<td>Unable to attend after October 12</td>
<td>Not admitted in school</td>
<td>Prince has attended only a few sessions as family has been having difficulties in sending him. Together with parents, the key worker has been exploring various possibilities. Besides this, Prince has been getting input for building motor, daily living skills and visual stimulation. His physical abilities, tracking people through sound, developing likes for a range of food items, recognizing household items through feel have improved significantly.</td>
</tr>
<tr>
<td>18</td>
<td>Rinku</td>
<td>8y/ M</td>
<td></td>
<td>Vision difficulties</td>
<td></td>
<td>Going to school, 3 std</td>
<td>Continuing</td>
<td>Some strategies such as reading wedge, appropriate lighting, large print letters and numbers seem helping him to cope with academics. These strategies need to shared with school.</td>
</tr>
<tr>
<td>19</td>
<td>Shweta</td>
<td>11y /F</td>
<td></td>
<td>Ataxia Telanigiechasi Is a wheel chair user.</td>
<td></td>
<td>Admitted in school. But not going</td>
<td>Continuing</td>
<td>Shweta has been attending Resource Centre regularly. She is currently functioning at class 1 level by Government school standard. The parents are not keen to send her to school because of the fear of her falling due to her condition. The school expects someone from the family to be with her as they do not want to take responsibility of her safety</td>
</tr>
<tr>
<td>20</td>
<td>Ruby</td>
<td>9y/ F</td>
<td></td>
<td>CP Diplegia Verbal, Wheel chair user</td>
<td></td>
<td>In class 2</td>
<td>Continuing</td>
<td>Ruby has been going to school for the past two years. She is better integrated in the school. Although she does face discrimination and ridicule sometimes, the key worker has been supporting the mother to sort out the problems by talking to the school. Major improvement that has come in Ruby is the confidence. Until sometime, she was hiding her face in the hand towel which was</td>
</tr>
<tr>
<td></td>
<td>Name</td>
<td>Age/</td>
<td>Condition</td>
<td>Date</td>
<td>Status</td>
<td>Class</td>
<td>Notes</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>-------</td>
<td>------</td>
<td>-----------</td>
<td>------------</td>
<td>------------</td>
<td>-----------</td>
<td>----------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Pawan</td>
<td>9y/M</td>
<td>Learning Disability</td>
<td>July 2012</td>
<td>continuing</td>
<td>Class: 3</td>
<td>There is improvement in reading and writing. However he might require intervention at Resource Centre for some more time.</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Maya</td>
<td>8y/F</td>
<td>Disability is not clear.</td>
<td>July 2012</td>
<td>continuing</td>
<td>Class 2</td>
<td>Maya comes across as an average intelligent girl. Her far below academic performance is due to lack of exposure. She is progressing well. Yet there is a wide lag between her level and the class she is in. work needs to continue. Much needs to be done with her teacher with her attitude.</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Neelu</td>
<td>14y/F</td>
<td>Cerebral Palsy, Spastics hemiplegia</td>
<td>July 2012</td>
<td>Continui ng</td>
<td>Promot ed to Class 2</td>
<td>Neelu is socially well integrated in school. Academically she is far behind the class</td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Priyanka</td>
<td>.../F</td>
<td>Cerebral Palsy, Hemiplegia</td>
<td>January 2012</td>
<td>continui ng</td>
<td></td>
<td>Priyanka is well integrated in school. There are some academic lags which is what is being focussed</td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Janhivi</td>
<td>/F</td>
<td>Hearing impairment</td>
<td>January 2013</td>
<td>continui ng</td>
<td>Not admitte d in school.</td>
<td>Janhivi has got the hearing aid. She has accepted it. The focus with her is speech &amp; auditory training. Jhanavi is progressing well</td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>Rehmat</td>
<td>/F</td>
<td>Cerebral Palsy</td>
<td>March 13</td>
<td>Continui ng</td>
<td>Has got admissi on to school in July 13. Will start going to school once wheel</td>
<td>Focus is assessment</td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>Name</td>
<td>Gender</td>
<td>Disability</td>
<td>Date</td>
<td>Admitted</td>
<td>Makes eye contact</td>
<td>Focus is auditory training &amp; speech therapy</td>
<td></td>
</tr>
<tr>
<td>----</td>
<td>-------</td>
<td>--------</td>
<td>------------</td>
<td>--------</td>
<td>----------------</td>
<td>------------------</td>
<td>---------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>Kashifa</td>
<td>3+/F</td>
<td>Hearing impairment</td>
<td>April 13</td>
<td>Not admitted in school.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Number of children attending schools regularly: 13

Number of children who have admission but waiting for wheel chair: 2

Number of children who have admission but not able to go because of lack of transport facility: 4

Number of children whose admission is in the process: 3

Number of children whose admission process has not started due to parent’s apprehension on the safety in school: 5

**Nutrition Programme**

The nutrition programme for the children coming to Resource Centre continued as before as it had a very positive impact on the physical and cognitive aspects. Besides the programme enabled children to become aware of seasonal food items and eating etiquettes. The attraction towards variety and healthy food also prompted parents to send children on a regular basis. The children also looked forwarded to the variety.

The various food items included varieties of sandwiches, eggs, milk, buttermilk, juice, seasonal fruits, salads etc.

In addition to the above nutrition programme, children who were identified as highly malnourished were provided additional nutrition support through two institutions: Women relief & Rehabilitation Trust & Delhi Millennium Ladies Circle 89. Through this programme the respective family received cash support to buy additional milk, egg and fruits for their children. The growth was monitored by regular checking of weights of these children.

**Rohit & Mohit** are brothers aged 8 years & 6 years respectively. The family often gets into crisis situations due to either mother falling ill or father losing jobs frequently. While Rohit has been going to school for the past two years, Mohit has just begun. Due to family’s circumstances both the children were highly malnourished. The nutrition support that these children get from both Resource Centre and Delhi millennium Ladies circle 89, has made a huge change in not only in their health conditions but also has improved their academic performance and social behavior.
**Transport facility**

The children were picked from their respective communities by the organization transport on the appointed days and brought to Resource Centre at Girinagar, Kalkaji. The support staff accompanies the bus.

On the days the transport could not be arranged, the children were brought in auto rickshaws. Some days parents of certain children (Sudip & pushkar) volunteer to accompany children.

**Specific support**

**Medical Support:**

Medical support were provided to two children, Subista & Shweta. Subista has started getting epileptic fits. Her mother is a single parent and was not financially in a position to get medicines regularly. Shweta has a progressive condition called Ataxic Telengiectasia. Shweta’s family was not able to buy medicines regularly. Both these families were linked to Delhi Millennium Ladies Circle 89 for medical support for 3 and 6 months respectively.

**Aids & appliances:**

Pushkar, Rehmat were supported to get wheel chairs to enable them to go to school regularly.

**Teaching learning materials**

- Adapted writing tools with grips suitable for children with tightness in the hands and fingers

- Visually stimulating flash cards with appropriate colour contrast were prepared under more than 10 themes.

- Graded worksheets in Maths and Hindi were developed to cater to children with intellectual challenges, low vision and attention deficit disorder
• Accessible flash card holder was designed and made. It is placed in such a way that the children themselves can access independently. This not only enabled the children to be independent but also instilled in them a sense of responsibility of putting things back in place after use.

**Working with parents**

Regular meetings were conducted for parents once a month to share the children’s’ work, role of parents in the programme and for understanding their further needs for their children

In all 7 Meetings were conducted. The parents whose children are making progress certainly attend meetings.

Increasingly more and more parents have started attending. Showing the parents the progress of their child through the children’s work during the session has been motivating parents quite much.

Three parents regularly come to the Centre and learn the techniques of training & teaching children. They not only work with their children but also help other children learn. Eg. 
Sudip’s mother and Himanshu’s mother

**Pushkar’s mother:**

Pushkar has been coming to the Centre for the last 2 years. Earlier Pushkar’s grandmother used to accompany Pushkar. Pushkar never worked well when his grandmother sits in the class. He would get distracted in her presence. However, ever since the mother started coming, pushkar started showing interest and progressed. The change in Pushkar motivated mother to accompany him regularly. This helped her learn the strategies and techniques that works well with him. She is also able to follow up at home with him.

**Rohit’s mother:**

Rohit’s mother came to AARTH-ASTHA in search of special school for her 6 year old son. Alongside working with her son in partnership with mother, AARTH-ASTHA also enabled her to understand about inclusive education in school through regular meetings with parents and other community members.. This prompted mother to approach mainstream school for admission of Rohit and has not given up her fight for Rohit’s right to Education.
Subista’s mother:
Subista’s mother is also a part of community team of AARTH-ASTHA. Very well versed with right to education for children with disabilities, she has been relentlessly lobbying with school authorities to have her child in school without any precondition from school. The school is demanding that mother should give in writing that she would spend all her time in school with Subista. While the mother is willing to be in school with Subista till such time she settles

Working with schools
Regular visits to school were done by the Resource Centre staff and the key workers to get the feedback from the teachers on their respective children. Wherever teachers shared their difficulties, the staff tried to share appropriate strategies, suggest reasonable accommodations for their children and also support teachers with graded worksheets.

Some teachers were open to suggestions. Currently only those children with disabilities who

- Can take care of themselves independently
- Are academically at par with other children

are seen in the school system. The school expects either one of the parents or attendant to remain with the child in the school.

Activities

- Outings

Two main exposure visits were: Visits to some important parks and visit to the zoo. For many children zoo visit was for the first time. Prior to taking children to the park, they were made familiar with wild life through documentary films. The names, habitats and feeding habits were made familiar to the children.
In connection with park visits, the children made art work such as paintings, collage making in groups etc. Through these activities they recalled what they observed in various places. These activities also enabled them to think and bring out their creative abilities.

Several photographs were taken of the animals during the visit. After the visit, the children watched the photographs and video and were able to recall most of what they saw.

These outings not only helped them to get first hand experience, but also enabled them to practice social & communication skills.

**Play-Repeat show at Delhi School of Drama**

In August 2012, ASTHA presented a play, Daastaan-e-Dilli, enacted by its children with disabilities. Many children coming to Resource centre also participated in the play. (Report was presented in Annual Report of 2011-12)

The show was very well received by the audience. The same play was chosen by National School of Drama for staging during their Children’s Theatre festival.

The repeat show boosted the confidence in children and even with a very fewer rehearsals, the children performed even better. Some older children took responsibilities of taking care of newer and younger ones.

**Celebrations**

**Diwali** was celebrated in the form of a *mela* with food, games stalls and mehendi corner. The people & children from the neighborhood were invited to participate in games & enjoy food. Some food items were prepared at home by parents, others were bought. Tents were pitched and illumination and other floral decorations were also done. More than 300 people attended the event. The identified children from Resource Centre participated actively right from planning to execution of the event. They made a significant contributions in decorations, chart making, manning the games &
food stall under adult supervision, and most importantly two children were involved in mehendi putting activity.

**Sonia** is a 12 year girl with intellectual impairment. She studies in the Government school. As per her age she is in class.4. However her reading and writing levels are far below her age. Training in the Resource Centre has improved her communication, social and to some extent academic skills, and most importantly her hyperactive tendency has reduced considerably. One of her strong ability that has come to forefront was her ability to draw floral motifs with lot of ease. She also was able to transfer this ability beautifully into mehendi when given opportunity to use mehendi cone.

Though shy in the beginning to put mehendi to others in the large gathering in the mela, when motivated & supported she did it for a short time when she found another young girl of her also doing the same.

**Holi, Id** were other festivals that were celebrated with the objective of providing opportunities to become more aware, share, care and enjoy togetherness.

**Participation in competitions**

**Participation in cultural activities in Lucknow- National level competition**

Five children participated in **Interstate cultural competition at City Montessori School, Lucknow** in December. 3 children from the Resource centre were participated in painting, puzzle and clay modeling and they won silver medals.

It was a great exposure for our children.

- **Sports day (April 2012).**

The Sports day was a large group activity comprising of children and young adults with disabilities and other marginalized children. In all 50 children /young adults participated.

The races were needle & Thread, Throw Ball, target hitting, Crawling, wheel chair race, supported walking race and more….

Each child however severely disabled may be, had a chance to participate in minimum two events. The standard games were modified to make them accessible to all children.

The parents were also present to cheer up their children. It was held in a park.
Transport facilities were provided to all children to arrive and go. Light refreshments were given to all children.

Each child was awarded a prize in addition to first, second and third prizes. The number of events was many. Some children won more than one prize.

The major learnings for the children were concept of winning/losing, facing disappointments/success in the right spirit, striving hard, concentration and following instructions.

- **Summer camp: May 2012**

The summer camp was also jointly organized with a company called XL India as part of their Global Giving Day. However, the preparation of this event was utilized as learning opportunities for children on some aspects of Summer season. The learning included awareness on availability of food items available, made, enjoyed, awareness on games played, opportunities to express same verbally, paper & clay crafts and through paintings. The children made collages of things available in summers when facilitated, craft items such as umbrella, fan, earthenware pots etc.

On 23<sup>rd</sup> May, the children recalled all facts that they learnt about the season. Two resource persons one for clay & paper craft , and another for painting were invited to conduct workshops with children for making many other art products and paintings on the theme: Summer. Around 45 volunteers joined hands with the children and participated in the workshop.

Around 50 children were present for the workshop. Some parents and siblings were also present.

After the craft and painting sessions, the children had a few rounds off game session. The game played was tug of war.
The camp concluded with lunch for all.

The venue, lunch and material expense for the camp day was borne by XL India.

**Overall impact of the programme**

- 10 more children were enrolled in the school
- The children who are attending schools are regular
- Motivation of the parents have improved: hence the number of children attending the programme regularly have increased; the parents are making efforts on their own for admission in school; more and more children are completing homework given to them
- A few teachers in the school have become open to suggestions given to them for the children with disabilities in their class
- Social, communication & self help skills of .... Children have improved and are ready for admission in their neighborhood schools.
- The parents of children who do not belong to the current target community, are also keen to bring their child for this programme for school readiness skills

**Success stories**

- **Shweta's Story**

  Much has changed in Shweta’s life.

  Shweta dropped out of the school due to frequent illness and falling frequently in school. ASTHA supported the family to get proper diagnosis. After coming to know about the progressive condition( ) of their child, the parents became hopeless. Being an intelligent child, Shweta soon came to know about her condition which made her very sad and left her depressed, and she stopped stepping out of the house

  ASTHA offered moral support to the family & the child, and further helped in getting regular nutrition and medical support.

  The child now comes to Resource Centre for school readiness again. She is participating in activities very enthusiastically and progressing fast in academic subjects. With hopes in heart the parents are trying to admit Shweta back in school.
Rohit’s Story

Rohit is a young of 6 years. Mother sent him initially to a play school. Soon the school recognized that he was a child requiring special needs. Although they let him come with the mother they could not bring much change in him. When he turned six they could not have him any longer, they advised the mother to send him to a special school.

At AARTH-ASTHA, the mother learnt about the right to inclusive education. Rohit was taken in the Resource Centre. Through systematic training his problem behaviours such as throwing and aggression reduced considerably. He started making good eye contacts; his interaction with older children increased; started following instructions; the highlight of his achievement is emergence of verbal communication and willingness to stay without mother in the class.

Motivated by the changes in Rohit in a short span of time, mother has become ready to speak to nearby MCD school for admission and if need be willing to stay in school to support the teacher to work with Rohit.

Reporting

The attendance of the children is maintained through register. The children mark their own attendance either by writing their names or finger prints. Some children got motivation to write their names so that they can sign attendance.

After initial assessment, a plan is made for every child. Based on the plan, a weekly plan is made. A reporting format for weekly report is being created to record the weekly changes. Every three months the team reviews the progress of the children, and a follow up plan is made. In the three monthly meeting the key workers are also invited to share the impact of the work carried out at the Resource Centre.

So far two three monthly reviews have happened.

Resources procured

Adapted chairs and tables

One chair and two tables were made according to the needs of the children.

One two-seated bench and desk also were made
These furniture have enabled children to maintain correct posture while working.

**Cupboards**

Two cupboards were custom made with wheels below. These cupboards are being utilized to keep children’s files, newly acquired teaching aids and teachers created Teaching-Learning materials. Wheels in the cupboards have enabled the special educator to rearrange the class frequently as per the requirements of the sessions.

**Capacity Building of the staff**

**Workshops on**

**Understanding Downs syndrome**

One staff member attended a workshop on Working with children with Down syndrome. The workshop enabled the staff member to get a better understanding on identification, health issues and strategies of working with children with Down syndrome. Highlights of the workshops also have been sharing of some powerful success stories which had been very motivating to the staff who attended the workshop.

The impact of the workshop had been that the staff could improve the planning for the child with Down Syndrome coming to the Resource Centre

**Understanding Deaf-Blindness**

Another staff member attended a workshop on Deaf blindness. This workshop enabled the staff to understand deaf blindness: identifications, strategies, TLMs, Individual Education programme and parents involvement. The highlight of the training programme has been the simulation exercises the participants underwent.

**Staff participation in RTE research**

As part of a Research project, Status of children with children under RTE in Delhi, uttar Pradesh and Odisha, undertaken by AARTH-ASTHA, a detailed questionnaire was developed by the research team. 50 children from AARTH-ASTHA’s target communities were choosen for sample study under Delhi. The staff from Resource Centre was involved in interviewing the parents and children.

Participation in the research had been a huge learning on various issues faced by the children which are barriers for them to access education
## Utilization of funds

**Name of the Project : Resource & Intervention Centre**

**Budget Period : January 2013 to December 2013**

**Reporting Period : January 2013 to June 2013**

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Coordinator</td>
<td>37150</td>
</tr>
<tr>
<td>2 Spl. Educator</td>
<td>45500</td>
</tr>
<tr>
<td>3 Team Associates</td>
<td>50812</td>
</tr>
<tr>
<td>4 General Assistance</td>
<td>6960</td>
</tr>
<tr>
<td>5 Exposure visits</td>
<td>251</td>
</tr>
<tr>
<td>6 Celebrations</td>
<td>198</td>
</tr>
<tr>
<td>7 Participation in competitions (including out station competitions)</td>
<td>188</td>
</tr>
<tr>
<td>8 Teaching – Learning materials, Furniture</td>
<td>5126</td>
</tr>
<tr>
<td>9 Nutrition for children</td>
<td>7217</td>
</tr>
<tr>
<td>10 Work with Schools</td>
<td>430</td>
</tr>
<tr>
<td>11 Transportation</td>
<td>6217</td>
</tr>
<tr>
<td>12 Administration costs</td>
<td>473</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>160522</strong></td>
</tr>
</tbody>
</table>