

Sahyog Sangharsh - Early Childhood Development and Disability Inclusion Program (ECDIP) Proposal to ASHA Danbury – 2025-26

Executive Summary

Since 2017, ASHA Danbury has been a vital partner in improving access to education to children with disabilities in urban slum communities of Suburban Mumbai. Through its partnership with Chehak Trust, ASHA has ensured that children continue their education.

Early Childhood Development and Disability Inclusion Program is rooted in the belief that raising a child is a shared responsibility. It brings together families, communities, and society at large to create a culture of care and inclusion. The program fosters a solidarity-based framework—one that transforms societal attitudes, revitalizes early childhood and disability services, and strengthens the knowledge and responsiveness of caregivers and frontline workers. By investing in these human and social systems, the program lays the foundation for sustainable, long-term change—ensuring that every child has the opportunity to thrive from the very start.

Children in urban low-income communities face multiple barriers to early childhood development, especially when at risk of cognitive or physical disabilities. These barriers include low awareness among families, missed diagnosis by frontline workers, and limited access to therapy or inclusive learning spaces. Despite government programs like Rastriya Bal Swasthya Karyakram and Scheme for Implementation of the Rights of Persons with Disabilities Act, the lack of convergence, early identification, and follow-up continues to delay critical intervention.

This project provides a timely and community-rooted solution by strengthening early detection, building local caregiver capacity, and linking children to essential therapeutic and educational services. By training frontline workers and integrating screening into routine health services, it addresses the current gap in early identification. Simultaneously, the project recognizes emerging challenges such as rising screen time, parental stress, and social isolation post-COVID, which have added new risks to child development.

Through a family-centred, inclusive, and collaborative model, this initiative not only responds to an ongoing systemic issue but also builds community resilience against emerging developmental risks. It aligns with government priorities while filling implementation gaps—ensuring that every child, regardless of ability or background, gets the chance to grow, learn, and belong.

Context

Early identification of developmental delays is critical for ensuring timely support to children at risk of disabilities. Yet, a major gap exists at the first point of contact—medical practitioners and frontline healthcare/child nutrition workers who often lack the training and sensitivity to detect congenital and cognitive delays during the neonatal and early infancy stages.

Without this early recognition, families—especially those from low-income backgrounds—are left unsupported, unsure of how to respond to their child’s needs. Many caregivers are unaware of the signs of delay, and those who do notice often lack access to affordable assessment or intervention services. This lack of guidance and follow-through can cause further regression in the child’s development, reducing the chances of inclusion in mainstream society. Suburban Mumbai and Thane slum clusters present a critical need and opportunity for early childhood and disability-focused interventions.

High Population Density & Migrant Communities: These communities face a unique confluence of socio-economic vulnerabilities, environmental stressors, and service delivery gaps that directly impact child development outcomes.

Underserved in Early Identification & Disability Services: There is a stark absence of early developmental screening, disability detection, and therapeutic support in urban slums. Low community awareness results in delays going unnoticed or stigmatized.

Overburdened ICDS & School Systems: Teachers and anganwadi workers have limited training in identifying or supporting children with developmental delays or disabilities, excluding children from meaningful learning and integration opportunities.

High Risk Environment for Developmental Delays: Slum children are disproportionately exposed to malnutrition, unsafe living environments

[Sahyog Sangharsh - Early Childhood Development and Disability Inclusion Programme \(ECDIP\)](#)

The Sahyog Sangharsh program, currently working with children, adolescents, and young adults (0–25 years) with disabilities, already embodies the foundational pillars of the proposed Early Childhood Development and Disability Inclusion initiative. The work reflects a systems-strengthening and community-anchored approach, which can be deepened and scaled further through this proposal.

Key features of Sahyog Sangharsh

Sahyog Sangharsh has been working with children between 0 to 18yrs and their caregivers to equip them with skills to become independent and part of the mainstream society. Sangharsh follows a zero-rejection policy and works with children with all type of disabilities and bridges the gap in services to children with disabilities. The centre provides all services under one roof medical assessment and diagnosis, therapy, remediation, mainstreaming, certification and linkages to government schemes, caregivers capacity building. The spirit of inclusion guides the program focusing all outreach work towards rights of children with disabilities and to be included in the society as productive members.

Outreach and disability sensitization: Community stakeholders are sensitized about disability, opportunities are created to encourage engagement between the stakeholders and children through celebration and community events, to clear misnomers and foster interaction. Major work is done with frontline government workers for early identification of disabilities and referrals.

Assessment & Therapy: Access to medical services for better diagnosis of the children's disability is crucial, for the communities that we work this can be difficult due to lack of finances and information. A team of multi special medical professionals are on board of Sangharsh. Assessments conducted and caregivers provided guidance on home intervention. Therapy is provided to those children who are in need of additional support.

Sangharsh team: The centre has two special educators, senior teaching staff and paraworkers who have been trained in child development aid, every year refresher trainings are provided to build the capacities of the team. The team is guided by an educational consultant. An outreach coordinator and social worker manage the community and centre operations of day to day respectively.

Remediation and Evaluation: Disha Abhiyan curriculum and assessment have been adopted at the centre which is centralized curriculum developed by Jai Vakeel Foundation. Through multisensory teaching and use of aids the children are prepared for school and home life. Caregivers are provided with home program to work on independent living skills. The individualised education plan is created for each child and evaluated biannually along with the discussions with caregivers.

Mainstreaming and Inclusion: Children are enrolled in regular special and private schools, both the child and caregivers are guided through this process. Regular follow up with schools and the children teachers is done to support the transition in the school life. Tutorial support is provided to the children through the support of volunteers to sustain academic progress.

Certification and Linkages to schemes: For long term sustainability, caregivers are guided with disability certification process and registration with other schemes like health insurance, pension scheme.

Program Objectives

- To provide the care and support required for approximately 60-70 children with or at risk of disabilities between age group 0 to 14 yrs.
- Detection of developmental delays and provide early children development intervention.
- Conduct assessments and offer remediation to prepare them for school life.
- Counselling and support to parents to prepare them for responsive caregiving.
- To sensitize community stakeholders on disability awareness and sensitization.
- To work with government and private institutions, schools and organizations within the formal system to promote inclusion and provide services for children with disabilities.

Proposed Activities

Chehak Trust has been operating in

- A. Early Identification Through Trained Frontline Workers:** Continuous capacity-building of Anganwadi workers, ASHAs, and school teachers to identify developmental red flags.
- B. Strong Family and Caregiver Engagement:** Building trust through home visits and support groups. Equipping caregivers with practical skills, emotional support, and decision-making power. Recognizing caregivers—especially mothers—as co-implementers, not just beneficiaries. Supporting families in navigating documentation and application processes.
- C. Multi-Sectoral Collaboration:** Seamless coordination between Health, WCD, Education (SSA), and Disability departments Joint trainings, referrals, and shared data systems
- D. Community Sensitization and Inclusion:** Regular outreach to challenge stigma and normalise disability conversations. Inclusion of peers and youth in recreational, learning, and creative engagement spaces.
- E. Early intervention and School readiness:** Working closely with the children to supplement early childhood development with multi-sensory activities and guiding caregivers to create a stimulating environment at home. Remediation and building foundational literacy for children preparing them for school life, provision of tutorial support to those enrolled in schools to sustain continuation of their education.

Sangharsh Disability program budget for April 2025 to March 2026

Budget S.N	Budget Head	Details	Monthly	Annual	Budget in USD
1	Special Educator	20000*12	20000	240000	2759
2	Sr. Programme Assistant (1)	12000*12	12000	144000	1655
3	Para-workers (4)	4000*4*12	4000	192000	2207
4	Community Coordinator	10000*12	10000	120000	1379
6	Administrative support & Overheads	11000*12	11000	132000	1517
8	Printing & Stationery, Learning Aids	5000*12	5000	60000	690
	Total		62000	888000	10207

Note: Special educator, Sr. Programme Assistant and Para-workers are involved in remedial education. Community-co-ordinator is involved in outreach and networking.

Currency Exchange Rate: (1 USD – INR 87)