

# Empowering the Differently-abled: Challenges and Opportunities



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# **Empowering the Differently-abled: Challenges and Opportunities**



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## Preface

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In our country, The Persons with Disabilities (PWD) Act has been in place for around fifteen years now, and yet, we have miles to go to claim inclusive development where differently-abled population participate in the development process with equal rights and opportunities.

This publication is a compilation of key findings based on secondary review and Disability Audit, first of its kind of primary research study, conducted by CMS Social in Bihar, Chhattisgarh, Jharkhand, Madhya Pradesh and Uttar Pradesh.

The monograph suggests some action points with the aim to trigger discussions amongst development practitioners, civil society groups and government to have inclusive growth in real sense.

My compliments to the CMS Social team members including Mr Alok Srivastava, Mr. Mumtaz Ahmed and Ms Chandni Nair for their efforts in making this publication possible.

In solidarity,

**P N Vasanti**  
*Director, CMS*



## 1.0 Overview

The Millennium Development Goals are a global plan of action to reverse extreme poverty, hunger and disease. Regrettably, disability, which constitutes 20% of global poverty, did not find any unambiguous place in these commitments. The blind eye to disability is universal.

In developing countries, there are more possibilities of the differently-abled to live in poverty and the poor to be vulnerable to disability. One-half of all disabilities are directly related to poverty. According to the UNDP Human Development Report 2010, there are more poor people in the states of UP, MP, Jharkhand, Orissa, Chhattisgarh, Orissa, Rajasthan and West Bengal than in the 26 poorest African countries combined. Poverty is both a cause and consequence of disability. There is a two-way link between poverty and disability. Poor nutrition leading to physical and intellectual impairments, lack of basic sanitation, limited access to health care, maternal care, poor hygiene, vulnerability to infectious diseases, low quality housing, hazardous working conditions, inadequate information about the causes of impairment, create disability among the poor. Lack of income, costs of treatment and rehabilitation, poor education all create poverty among the differently-abled.

Education is the vehicle of empowerment. A huge majority of the differently-abled interviewed had not gone to school because of unfavourable economic conditions. In the case of the differently-abled, there are several meanings attached to it. Most often, families from poor backgrounds do not see any point in investing time or resources in the education of their differently-abled children as they will never be able to contribute to the economic needs of the household.

Since the differently-abled are not seen as contributing to the economy but rather as dependents and recipients of charity and welfare of the family and that of society, little attention is paid to their empowerment through employment. The skills they are able to receive remain limited to skills such as basket weaving, making paper bags and candle-making. Despite legislations and programmes and schemes, most of them remain uneducated and are not able to participate in society and lead an independent life.

As per Census 2001, around two-third of the differently-abled workforce in India is not engaged in any income generating activities. Despite 3% reservation for differently-abled persons in government jobs, the positions are lying vacant. Only 1.8% and 7.3% of the differently-abled in rural areas and urban areas, respectively, are regular paid employees. The PWD Act, which cannot be forced upon private sectors, leaves out the differently-abled with few opportunities.

Special employment exchanges for differently-abled population is in very selected cities and even wherever they is one, the differently-abled educated youth registered with Employment Exchanges are very few.

It is increasingly been realized and recognized that in order to achieve international development targets, the differently-abled need to be included in the existing poverty alleviation initiatives besides developing new programmes and schemes for them.

The strong voice of the disability movement, the shift to a human rights approach, a National Policy, international and national agreements and legislation, the inclusion of disability in the Census are all noteworthy moves towards mainstreaming disability. However, at the ground level, the pace of transition is slow. Special focus needs to be placed on the differently-abled in backward regions and backward sections of society and an increase in the budget of these regions. Those working in the area of poverty, poverty-related policies, poverty alleviation programmes etc should place special focus on the differently-abled. Pro-poor policies should include disability in more explicit ways. In short, to mainstream disability, these are vital.

## 2.0 Context

The Millennium Development Goals are a global plan of action to reverse extreme poverty, hunger and disease. Regrettably, disability, which constitutes 20% of global poverty, did not find any unambiguous place in these commitments. In developing countries, poverty and disability go hand in hand as there are more possibilities of the differently-abled to live in poverty and the poor to be vulnerable to disability.

This monograph attempts to look at disability in the context of poverty and social, economic and regional backwardness in five of the poorest states of the country, Bihar, Jharkhand, Madhya Pradesh, Chhattisgarh and Uttar Pradesh. It emphasises that poverty and backwardness aggravate disability, and disability makes poverty inevitable.

Besides primary data collected during a situational analysis study, 'Disability Audit' conducted by CMS social in 2006<sup>1</sup>, the paper makes use of policy documents of the Government, reports of Census and NSSO, reports of ministries of the Central and State governments, media reports, papers written by academicians and researchers, and surveys and analyses by NGOs.

The publications serves to underscore the fact that if development has to be truly inclusive, it needs to include the differently-abled who are among the poorest of the poor in the world.

### Perspectives, Defining and Measuring Disability

Disability is understood from two perspectives, the medical model and the social model. The medical model of disability views it as pathological and locates it in the individual. This perspective emphasizes the biological origin of the disabling condition and views disability as an individual health issue that may be prevented or ameliorated through medical intervention. The social model, on the other hand, proposes that disability is a social construct and that it is society that makes a person disabled by social, cultural, economic, environmental, institutional, attitudinal barriers. In order to erase these barriers, it is important that vigorous rights-based approach be adopted and changes in policies and affirmative action be made.

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<sup>1</sup> In 2006, CMS social, the social research division of Centre for Media Studies, New Delhi, conducted an audit among the disabled population in six DFID's PACS states of the country - Bihar, Jharkhand, Madhya Pradesh, Chhattisgarh, Uttar Pradesh and Maharashtra - with the objective of understanding the status of the disabled, based on the perspectives and experiences of the disabled themselves and creating a disabled-centric understanding of several dimensions of disability. This monograph makes use of some data collected in the audit. The study was carried out for NCPEDP, an organization working with differently-abled.

The definition of disability changes from one context to the other and 'differs and changes with evolving social, political and legal discourses' (Mitra & Sambamoorthy 2006 cited in Singal 2009)<sup>2</sup>. While this is acceptable, the lack of clarity over the actual numbers of the differently-abled might prove to be an impediment in the conceptualization of policies and implementation of schemes and programmes and the possibility of exclusion of large numbers of the differently-abled. In post-Independence India, the first Census in which the number of differently-abled was counted took place in 1981. It was alleged that there was gross under-enumeration of numbers due to a variety of reasons. Numerous attempts in the form of campaigns and appeals by the disability movement finally resulted in the inclusion of the disability factor in Census 2001. However, there were wide gaps between the numbers cited by Census and those by agencies such as the World Bank.

Census 2001 reported the total number of differently-abled in India to be 2.13% of the total population<sup>3</sup>, which translates into 21.91 million<sup>4</sup>. The National Sample Survey Organisation (NSSO) data of 2002 reported the same to be 1.8% (18.5 million)<sup>5</sup>. The definitions of disability used by Census of India, NSSO and even the United Nations differ. The World Health Organisation puts the global prevalence rate at 10%. According to the National Centre for the Promotion of Employment of Disabled Persons (NCPEDP), nearly 5 to 6 per cent of the population is differently-abled and the World Bank estimates this to be as high as 40-50 million 'if more inclusive definitions of disability are employed'. Issues of under-reporting due to social stigma, shortage of well-trained investigators, likelihood of only obvious or more visible disabilities being reported and problems with identification of impairments are some of the accepted reasons for the lack of reliability on these figures.<sup>6</sup> The disability movement also attributed this to the fact that the decision to include disability in Census 2001 was taken at the last moment and there was not enough time for preparation. Also, issues related to framing of appropriate questions, translation into the required languages and training of enumerators

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<sup>2</sup> Singal, Nidhi, 2009, 'Education of children with disabilities in India', Background paper for Education for All Global Monitoring Report 2009, UNESCO (Available at [unesdoc.unesco.org/images/0018/001866/186611e.pdf](http://unesdoc.unesco.org/images/0018/001866/186611e.pdf))

<sup>3</sup> 1028.6103 million

<sup>4</sup> Census 2001 Office of the Registrar-General and Census Commissioner, Ministry of Home Affairs, Govt of India, Available at <http://www.censusindia.net/>

<sup>5</sup> National Sample Survey Organisation, Ministry of Statistics and Programme Implementation, Govt of India. Available at [http://mospi.gov.in/nssso\\_4aug2008/web/nssso.htm](http://mospi.gov.in/nssso_4aug2008/web/nssso.htm)

<sup>6</sup> Mitra & Sambamoorthy 2006 cited in Singal, Nidhi, 2009, 'Education of children with disabilities in India', Background paper for Education for All Global Monitoring Report 2009, UNESCO (Available at [unesdoc.unesco.org/images/0018/001866/186611e.pdf](http://unesdoc.unesco.org/images/0018/001866/186611e.pdf))

added to the alleged inaccuracies. It is hoped that these issues will be rectified in Census 2011.<sup>7</sup> This imprecision of information and the high degree of subjectivity in defining and, thereby, identifying the differently-abled has serious implications for steps to be taken towards their empowerment.

### 3.0 Disability and Poverty: Multiple Dimensions

The World Bank estimates that 20% of the world's poorest people are the differently-abled (Elwan, A 1999 cited in Thomas 2005<sup>8</sup>). According to recent studies by World Bank, "half a billion disabled people are undisputedly amongst the poorest of the poor" (Metts 2000 cited in Yoe 2001)<sup>9</sup> and are estimated to comprise "15 to 20% of the poorest in developing countries" (Elwan 1999 cited in Yoe 2001)<sup>10</sup>. According to the UNDP Human Development Report 2010, there are more poor<sup>11</sup> people in the states of UP, MP, Jharkhand, Orissa, Chhattisgarh, Orissa, Rajasthan and West Bengal than in the 26 poorest African countries combined.

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<sup>7</sup> Bakshi, Kamal, 2010, 'Disability and Census of 2011', *The Hindu*, August

<sup>8</sup> Thomas, Philippa, 2005, 'Disability, Poverty and the Millennium Development Goals: Relevance, Challenges and Opportunities for DFID', *DFID Policy Project*, June

<sup>9</sup> Yoe, Rebecca, 2001, 'Chronic Poverty and Disability', *Chronic Poverty Research Centre, Background Paper no. 4*, August

<sup>10</sup> *Ibid.*

<sup>11</sup> The measure of poverty used is the *Multidimensional Poverty Index*, which assesses a range of factors or 'deprivations': from education to health outcomes to assets and services.

**Bihar**

Almost 40% live BPL.

54.4% of children <5 are malnourished.

IMR 72.9 per 1,000 live births.

MMR 451 per 1,00,000 live births.

Only 16.8% of households have access to sanitation.

Only 10.3% of households have electricity.

**Jharkhand**

26% of villages are connected by all-weather roads.

Less than 25% have electricity.

A mere 10% of potentially arable land is actually irrigated.

Rural sanitation coverage is 7%.

IMR 71 per 1000 live births.

Malnutrition 54%.

Nine out of 10 births take place at home with two-thirds being conducted by untrained TBAs.

40% of children between the ages of 6 and 14 do not go to school.

**Madhya Pradesh**

44% BPL

More than one-third belong to SC and ST (proportion of poor is substantially higher among STs)

MMR 448 per 1,00,000 live births

IMR 86.1 per 1,000 live births

55.6% are underweight

**Chhattisgarh**

43% BPL

SC & ST – 57% of BPL

Half the population has no access to electricity, safe drinking water or sanitation

IMR 81 per 1000 live births

More than 61% of children under 3 are underweight

**Uttar Pradesh**

More than 60 million BPL

MMR 707 deaths per 1,00,000

IMR 85 per 1,000 live births

More than 50% under age of 3 are malnourished

Three out of 10 children never immunized

Source: India Project Portfolio, World Bank 2005

(Available at [http://siteresources.worldbank.org/INTINDIA/Resources/India\\_Project\\_Portfolio.pdf](http://siteresources.worldbank.org/INTINDIA/Resources/India_Project_Portfolio.pdf))



The large number of the differently-abled in these poverty-ridden states emphasizes the relationship between poverty and disability. Literature reviewed by Elwan<sup>12</sup> refers to UNICEF's observation that there are several factors specific to developing countries that led to impairment and disability, some of these being a high proportion of population being poor, illiteracy, inadequate information about causes, prevention and treatment of disability, geographic distances, social barriers, infrastructural barriers, low priority for the amelioration of the the differently-abled. Not surprisingly, these apply to the poorest states of India also.

Going by Census 2001 data, the five states of Bihar, Jharkhand, Madhya Pradesh, Chhattisgarh and Uttar Pradesh together constitute 17.3% of the total population of the differently-abled (2.13%).

**Table 1: % of disabled population to total disabled population in India**

Bihar	8.6
Jharkhand	2.6
Madhya Pradesh	2.3
Chhattisgarh	1.9
Uttar Pradesh	1.9

Source: Census 2001

The relationship between marginalization and disability is clear as revealed in the CMS social disability audit. Out of the 1,010 differently-abled sampled by CMS social in the five backward states, a huge majority were from SC, ST and OBC groups.

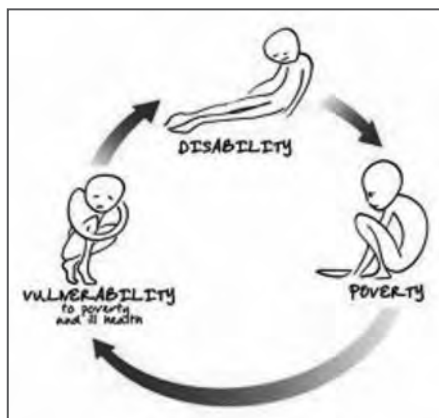
**Table 2: Social group composition (%)**

	SC	ST	OBC	General
Bihar	32	3	47	18
Jharkhand	19	18	46	17
Madhya Pradesh	28	4	33.5	34.5
Chhattisgarh	8	21.5	45	25
Uttar Pradesh	42.5	5	32.5	20

Source: CMS social disability audit 2006

<sup>12</sup> Elwan, Ann, 1999, 'Poverty and Disability: A Survey of the Literature', WDR 2000/2001

Poverty is both a cause and consequence of disability. There is a two-way link between poverty and disability. Poor nutrition leading to physical and intellectual impairments, lack of basic sanitation, limited access to health care, maternal care, poor hygiene, vulnerability to infectious diseases, low quality housing, hazardous working conditions, inadequate information about the causes of impairment, create disability among the poor.



Source: cbmicanada.org

The other way round, disability can cause poverty. Costs related to treatment and rehabilitation makes the poor families prioritise disability as low. A study in Tamil Nadu found that the average costs of disability were over 9% and amounted to two to three times the productivity losses from poor nutrition (Erb and Harris-White 2002 cited in Thomas 2005<sup>13</sup>). The three-fold economic costs that the differently-abled have to bear are direct costs of treatment, foregone income from disability, and indirect costs to others who provide care.<sup>14</sup> The differently-abled have fewer opportunities to escape poverty than the non-disabled. They are marginalized when it comes to employment opportunities. Programmes such as NREGA, which have been designed to provide employment opportunities, do not take into consideration disabilities. The disabilities spill over into all aspects of their lives and translate into marginalization in education, health, employment, living conditions and standards, etc, leaving them trapped in poverty.

<sup>13</sup> Thomas, Philippa, 'Disability, Poverty and the Millennium Development Goals: Relevance, Challenges and Opportunities for DFID', DFID Policy Project, June 2005

<sup>14</sup> Ibid.

## The marginalization of the poor

### *The rural-urban divide: aggravating deprivation*

The urban bias, a legacy of the British who did all to develop urban areas at the cost of the rural, is also seen in aspects related to the life of the differently-abled. 75% of the differently-abled population lives in rural India<sup>15</sup> while most of the country's rehabilitation centers are situated in urban areas.

**Table 3: %age of rural population to total disabled population**

India	75
Bihar	90
Jharkhand	78
Madhya Pradesh	75
Chhattisgarh	82
Uttar Pradesh	78

*Source: Census 2001*

The National Policy on Disabled Persons 2006 recognised that rehabilitation services were largely available in and around urban areas, with no coverage of a large majority of persons with disabilities in rural areas. The process of transporting the differently-abled person to these centers in urban areas for appraisal, treatment or training is itself a dilemma for the family. It means incurring cost for the travel besides losing on the daily wages for the family member who escorts the person. This also applies to the process of taking the rehabilitation aids for repairs.<sup>16</sup>

In addition, the rehabilitation aids and mobility appliances have been pointed out by NGOs as being unsuitable for rural Indian conditions. Wheelchairs and tricycles do not match the rural surroundings and lifestyle where everything is practised at ground level, whether it is cooking or sleeping or the toilet facilities. 'In the muddy and uneven lanes of the villages, using the wheelchair is difficult and dangerous. The wheelchair user finds it not just difficult, but sometimes even dangerous to negotiate the sandy, uneven mud lanes in the villages independently.'<sup>17</sup>

<sup>15</sup> Census 2001 Office of the Registrar-General and Census Commissioner, Ministry of Home Affairs, Govt of India, Available at <http://www.censusindia.net/>

<sup>16</sup> 'Rehabilitation of the rural disabled', Disability India Network (Available at <http://www.disabilityindia.org/rehabDisabled.cfm>)

<sup>17</sup> *Ibid.*

## 4.0 Education: The 'Backward' Indicator

Education is the vehicle of empowerment. But for the differently-abled, it is considered merely as a means to make them functional. The denial of education is the denial of empowerment, inclusion, participation and opportunities. Despite various efforts, the educational attainment of the differently-abled remains low.

The five states surveyed rank among few of the lowest in terms of literacy levels. Bihar and Jharkhand are the lowest in the ranking.

**Table 4: State-wise ranking by literacy level**

	Literacy level	Rank
Chhattisgarh	64.66	23
Madhya Pradesh	63.74	24
Uttar Pradesh	56.27	31
Jharkhand	53.56	33
Bihar	47.0	34

Source: Sarva Shiksha Abhiyan



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Poverty translates into low levels of education. Low level of education is also a determinant of poverty. As per Census 2001, 49% of the total population of the differently-abled in the country is illiterate, out of which 33% live in rural areas and 16% in urban. The NSSO 2002 report revealed that out of the total population of the differently-abled in rural areas, approximately 59% are illiterate, and of the total population of the differently-abled in urban areas, 40% are illiterate.

Among the differently-abled literates, the situation is not any better. While 24.4% and 28.8% of the differently-abled in rural areas and urban areas, respectively, had completed primary school, only 9.7% and 13.7% of the differently-abled respectively, had completed upper primary. Further, only 7% and 17% of the differently-abled in rural areas and urban areas, respectively, completed secondary and/or higher secondary school. Only 2.1% of the differently-abled in rural areas and 5.1% in urban managed to reach higher secondary school. As per NSSO, very few of the differently-abled have received college education.<sup>18 19</sup>

<sup>18</sup> 1% in rural areas and 4% in urban

<sup>19</sup> NSSO 2002

Singal<sup>20</sup> cites a 2007 World Bank study that says that people with disabilities have much lower educational attainment rates, with 52 percent illiteracy against a 35 percent average for the general population. The report goes on to suggest that illiteracy levels are high across all categories of disability, and extremely so for children with visual, multiple and mental disabilities (and for children with severe disabilities across all the categories). Equally, the share of children with disabilities who are out of school is around five and a half times the general rate and around four times even that of the ST population. Singal goes on to write that when children with disability do attend school, they rarely progress beyond the primary level, leading ultimately to lower employment chances and long-term income poverty.

Singal indicates to data wherein it can be seen that even in states with good educational indicators and high overall enrolment, such as Kerala and Tamil Nadu, a significant share of out-of-school children are those with disabilities.

**Table 5: Educational status of disabled**

	Bihar	Jharkhand	MP	Chhattisgarh	UP
Illiterate (%)	52	57	59.5	57.5	66.5
Completed primary education (%)	8	8	13.5	12.5	6
Went to special school (%)	15	1.5	1.5	9.9	10.4

Source: CMS social disability audit 2006

It is clear from the evidence collected in the CMS social disability audit that in the year 2006, in the backward states of Bihar, Jharkhand, MP, Chhattisgarh and UP, more than half of the differently-abled population were illiterate. Of those who managed to enroll, very few survived beyond primary school. Children who entered special schools were a handful. Lack of special schools was also pointed as one of the main reasons for children not attending school.

Incidentally, the situation of the differently-abled is no better in many parts of the country. A study conducted by the National Centre for Promotion of Employment for Disabled People disclosed shocking facts of discrimination against the differently-abled. A survey of 89 schools across the country found that a mere 0.5 % of the total number of students were differently-abled though the Persons with Disabilities Act recommends a reservation of 3% seats in institutions funded by the government. Eighteen of the schools surveyed acknowledged that they did not admit differently-abled children. 20% of the schools polled were not aware of the

<sup>20</sup> Singal, Nidhi, 2009, 'Education of children with disabilities in India', Background paper for Education for All Global Monitoring Report 2009, UNESCO (Available at [unesdoc.unesco.org/images/0018/001866/186611e.pdf](http://unesdoc.unesco.org/images/0018/001866/186611e.pdf))

PWD Act at all. While girls comprised 41.6 % of the total student population, among children with disabilities, the percentage of girls was only 33.

In 2007, in Kolkata, Child Rights and You and Sruti Disability Rights Centre conducted a study that covered various aspects of inclusive education. The group sought an appointment with 65 schools in the city, of which only 30, including 16 government schools and 14 private schools, responded positively. Shockingly, the study revealed that 50% of government schools and 36% of private schools were not aware of the 3% reservation for differently-abled children. According to the study, differently-abled students comprised only 0.16% of government school students; private schools had a slightly higher percentage of 0.31%. The study also showed that none of the 65 schools in Kolkata that were visited had a ramp or any form of infrastructural facility within their buildings and premises.<sup>21</sup>

Poverty manifests itself in several ways. For the differently-abled children, the reasons for low levels of schooling are magnified as compared to other children. For example, distance

**Table 6: Reasons for not attending school (%)**

	Bihar	Jharkhand	MP	Chhattisgarh	UP
Unfavourable economic conditions	73.4	57.4	69.3	54.2	74.3
Distance from home	14.7	11.2	43.6	11.7	7.8
No special schools	28.8	31	9.5	19	17.9
Disability	40	37.8	36.9	50.8	36.3
Lack of interest	0.6	1.1	1.1	2.8	3.4
Other	0	0	0.6	0	0

Source: CMS social disability audit 2006

from home, which may be an obstacle for other children, will take on huge proportions when it comes to the differently-abled child. Accessibility becomes one of the major causes for children to forego school. In the CMS social disability audit, it was found that a huge majority of the differently-abled interviewed had not gone to school because of unfavourable economic conditions. In the case of the differently-abled, there are several meanings attached to it. Most often, families from poor backgrounds do not see any point in investing time or resources in the education of their differently-abled children as they will never be able to contribute to the economic needs of the household. Lack of special schools in the neighbourhood/locality

<sup>21</sup> Sengupta, Shampa, 2008, 'Out of sight, out of mind', *InfoChange News & Features*, September (Available at <http://infochangeindia.org/200809087327/Disabilities/Features/Out-of-sight-out-of-mind.html>)

was another major reason for not being able to access school education. The affordability of special schools is also an issue of concern. A Planning Commission document states that ‘the system of special school, clinic, home based learning, institutional care for the drug-dependents, and so on, is obviously too costly for a country with our per capita income and therefore, alternative modes of delivery of care have to be developed through the community NGOs and even Gram Panchayats but under the overall scientific and technical guidance of the state level apparatus.’<sup>22</sup>

Not surprisingly, the situation in these backward states resembles that of some countries in Africa. Rwanda’s policy for people with special needs, Special Needs Policy, states that differently-abled children are excluded from their local schools due to long travel distances, discriminatory attitudes among students and staff, communication barriers for those who are deaf and blind, lack of support for teachers, and inaccessible school infrastructure. In Ethiopia, World Vision contacted parents of differently-abled children who did not attend school and they stated several reasons for the same – impatience of teachers in the mainstream schools and the inability of fellow students to not understand their difficulties; too few special schools, which were also expensive. Teachers were unaware of several rights of children to education. As in India, it was also found by the World Vision study that special units and schools were mostly confined to urban areas. These had long waiting lists, and that “technical and vocational education and training programs have predetermined rules imposing restrictions on candidates with special educational needs”.<sup>23</sup>

Architectural aspects are simple aspects that can be taken care of but aren’t. They continue to disable the differently-abled ever more. Javed Abidi, one of the leaders of the disability movement, says, “I am only wheelchair-bound and yet, at virtually all Indian universities, I cannot access classrooms and libraries.” The lack of disabled-friendly public transportation systems, pedestrian signs, public facilities like public toilets, schools, sports auditoriums, clinics, hospitals, malls etc is a problem that reflects social and institutional insensitivity and violation of basic human rights.

The PWD Act provides that in the event of a school refusing admission to a differently-abled child or the absence of ramps making attendance difficult for a differently-abled student, parents or relatives can take up the matter with the Disabilities Commissioner for redressal. Even Panchayats are provided funds to build paved roads, school and public ramps for the differently-abled by the government. However, awareness regarding the PWD legislation itself is low let alone its contents. In Bihar, Jharkhand, MP, Chhattisgarh and Uttar Pradesh, the percentage of

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<sup>23</sup> Lewis, Ingrid, 2009, ‘Education for Disabled People in Ethiopia and Rwanda’, Background paper prepared for the Education for All Global Monitoring Report 2010, *Reaching the marginalized*, UNESCO

**Table 7: Percentage of schools having ramps**

		Bihar	Jharkhand	MP	Chhattisgarh	UP
Primary only	2006-07	15.5	3.2	23	23	32.8
	2007-08	16.5	3.3	33.6	30.7	57.7
Primary with U. Pry	2006-07	24.8	10.2	17.5	13.6	14.5
	2007-08	33.4	10.4	23.4	21.4	16.8
P+UP+H/S	2006-07	20	7.5	21.9	15.4	14.6
	2007-08	11.8	15.2	35.3	20.1	20.9
U. Primary only	2006-07	19.8	4.7	20.8	19.9	26
	2007-08	25.6	12.7	40.2	30.2	44.7
U. Primary + Sec. H/S	2006-07	5.5	4.3	25.3	20.9	10.3
	2007-08	5.4	9.2	30.3	21.4	16.8
All schools	2006-07	17.7	4.6	22	21.5	30.3
	2007-08	20.6	5.6	34.2	29.5	52.5

Source: 'Elementary Education in India: Where do we stand?', State Report Cards 2007-0, Sarva Shiksha Abhiyan, National University of Educational Planning and Administration, New Delhi



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school buildings having ramps becomes lesser as we move from junior to senior school.

The responses of the educated respondents in the CMS social disability audit showed that very few facilities were available for the students with disability. The lack of facilities is a major impediment in school attendance for the poor and doubly so in the case of the differently-abled

For the differently-abled from poor socio-economic conditions, non-availability of facilities adds to the list of reasons for non-attendance. The NGOs and representatives of local government interviewed in the CMS social disability audit were of the view that except scholarship, there were no other facilities available in schools for children with disabilities. The amount of scholarship was too inadequate to meet even basic requirement of the students.

Although the Sarva Shiksha Abhiyan (SSA), programme has taken several steps towards the inclusion of children at school level,<sup>24</sup> it is a matter of concern that only around 1% of the funds

<sup>24</sup> With effect from April 2009, the IED scheme has been replaced by Inclusive Education for the Disabled at Secondary Stage (IEDSS) scheme, which aims to enable all students with disabilities completing eight years of elementary schooling an opportunity to complete four years of secondary schooling (classes IX to XII) in an inclusive and enabling environment; provide educational opportunities and facilities to students with disabilities in the general education system at the secondary level (classes IX to XII); and support the training of general school teachers to meet the needs of children with disabilities at the secondary level



**Table 8: Facilities available in educational institutions (%)**

	Bihar	Jharkhand	MP	Chhattisgarh	UP
Free books	10	22.2	38.8	23.9	23
Special aids & appliances	1	14.8	4.7	4.5	8
Scholarships	9	64.2	10.6	17.9	13
Free lunch	4	21.0	9.4	6.0	8
Speech training	2	18.5	4.7	4.5	5
Free education	7	23.5	10.6	6.0	35
Books in Braille	-	11.1	2.4	10.4	8
Easy access to toilets	2	16.0	-	10.4	-
Transport facility	-	-	-	-	-
Free uniform	-	-	2.4	-	7

Source: CMS social disability audit 2006

are spent on inclusive education. The focus on inclusive education began in the 1970s. However, the budget for educating children with mild to moderate disability in regular school settings has not increased.<sup>25</sup>

The Right of Children to Free and Compulsory Education Act 2009, which came into force on 1 April 2010 did not include any provision for differently-abled children. After much protest from activists, later that month, an Amendment Bill was introduced whereby those with cerebral palsy, mental retardation and autism will be treated as “disadvantaged groups” and included in the special category. Child rights and disability activists are now protesting against the fact that dyslexic children have been excluded. Despite legislations and programmes, widespread discrimination against the differently-abled exists in society.

In addition to poverty, gender discrimination too intersects with disability to make matters worse for differently-abled women and girls. This intersection is evident in all aspects and they remain the most disempowered of the lot. In terms of education, the number of boys in both special as well as mainstream schools is higher than that of girls. Also, more girls than boys drop out of school. There are several factors, including cultural, social, economic, that create these biases against girls. They are vulnerable to sexual abuse and violation. Lack of societal and infrastructural support affects girls more than boys. A differently-abled girl is considered

*World Bank, 2008, People With Disability in India: From Commitment to Outcomes, World Bank report, December (Available at [www.worldbank.org](http://www.worldbank.org))*

a lifelong burden because of the notion that she will never gain the opportunity to marry. In society that considers marriage to be an important institution, this creates more reasons for the negligence of the girl child. She is also considered an economic burden as she will never be able to earn. Lack of education impacts the economic position of the differently-abled girl/woman. Ultimately, she remains bereft of all opportunities.

## 5.0 The Differently-abled and Economic Participation

Poverty is the face of the lack of economic growth. In addition, historical and social backwardness, landlessness, agricultural crisis, food insecurity all define chronic poverty. Poverty is a major push factor of migration. Out-migration from the poor states, especially Bihar, Madhya Pradesh and Uttar Pradesh consists of the socio-economically backward groups.

Hunger is a blatant manifestation of poverty. The International Food Policy Research Institute (IFPRI) in 2008 published the India State Hunger Index that enables comparisons between Indian states but also with other nation states. The Index is alarming: all the states of India, which as a nation state ranks 66 among 88 countries, are classified as suffering from high hunger prevalence. The worst-performing states are Madhya Pradesh, which ranks between two very poor African countries (Ethiopia and Chad), followed by Bihar and Jharkhand, which are classified as worse than Zimbabwe and Haiti. (Ghosh 2009 cited in Schoch 2009)<sup>26</sup>

It is constantly been brought to light that poverty alleviation schemes, such as the National Rural Employment Guarantee Programme (NREGP), are not being implemented properly. Data submitted by the Ministry of Planning to the Parliamentary Standing Committee on Finance in 2008 revealed that Bihar and Uttar Pradesh households were employed just about half the number of days compared with the national average. While households in Rajasthan were employed for as many as 66 days and those in Tamil Nadu and Madhya Pradesh for 58 days each, Uttar Pradesh and Bihar households could manage work for just 28 and 22 days, respectively. The national average was 43 days in fiscal 2006-07 and deteriorated to 38 days in 2007-08.<sup>27</sup>

Seen from the perspective of the medical model, the differently-abled are unable to be a part of the economy. It is understood that they cannot be a part of the production process and cannot contribute to the economy because of their physical impairment. Tursumani (2003) writes that 'disability from the perspective of the social model is seen as a product of a disabled person's

<sup>26</sup> Schoch, Violayne, 2009, 'Food Availability in the Poorest Households: Report of a Survey in Central Jharkhand', Gene Campaign, July-August

<sup>27</sup> Shan, Satish Rau, 2008, 'NREGP weak in poorest states, distress districts', [www.indianexpress.com](http://www.indianexpress.com), April (Available at <http://www.indianexpress.com/news/nregp-weak-in-poorest-states-distress-distr/299795/>)

relationship to the economy'. According to him, they are unable to contribute to the economy due to their functional limitation. They are being excluded from work place and suffer great social and economic deprivation (Oliver, 1990; Doyle, 1995 cited in Tursumani 2003). As a result, they are unable to meet even their basic needs.<sup>28</sup>

When employment rates in general are low, the differently-abled whose participation in the economy is only marginal find themselves more and more marginalized. As per the UN, in developing countries, 80-90% of the differently-abled population is unemployed. According to Census 2001, 65% of the total differently-abled population is not engaged in any income generating activity despite the implementation of the



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PWD Act, 1995, and enforcement of 3% reservation in government jobs. As per NSSO 2002, only 1.8% and 7.3% of the differently-abled in rural areas and urban areas, respectively, were regular paid employees. According to a Planning Commission report, in 2002, only 38% of persons with disabilities were employed.<sup>29</sup> The UN Enable also quotes figures from International Disability Rights Monitor, 'Regional Report of Asia 2005 that 74% of the physically handicapped in India was unemployed and 94% of those with mental retardation was unemployed.<sup>30</sup>

**Table 9: Differently-abled Employment Status**

State	Differently-abled population not engaged in income generation activities (%)
India	65.50
Bihar	66.37
Jharkhand	67.12
MP	62.39
Chhattisgarh	64.89
UP	67.9

Source: Census 2001

<sup>28</sup> Tursumani, Majid, 2003, 'Poverty and Disabled People in Development Context: Examples from Jordan and Afghanistan', *Staying Poor: Chronic Poverty and Development Policy Conference, 7th-9th April 2003, Manchester, UK*

<sup>29</sup> 'Employment of Persons with Disabilities in Public Sectors in India: Emerging Issues and Trends – An Evaluation Study with Special Reference to Persons with Disabilities Act', Society for Disability and Rehabilitation Studies for Planning Commission, Govt of India, 2008

<sup>30</sup> UN Enabled Rights and Dignity of Persons with Disabilities, 'Disability and Employment, Fact Sheet 1' (Available at <http://www.un.org/disabilities/default.asp?id=255>)

The CMS social disability audit found that a huge majority of the respondents were unemployed.

**Table 10: Occupational status of respondents\***

	Bihar	Jharkhand	MP	Chhattisgarh	UP
Unemployed	74.7	61.8	70.4	69	71.1
Wage labourer	12.0	17.1	18.2	0	0
Skilled worker	4	5.3	0.6	1.3	3.3
Non-agricultural	0	0	0	12.7	13.2
Govt employee	0	0	1.3	0	0
Private service	2.7	7.9	3.1	1.3	2.6
Beggar	4	0	2.5	0	0
Shop owner	0	6.6	1.9	3.8	0
Agricultural work	0	0	0	8.2	8.6
Farmer	0	0	0	3.8	1.3
Other	2.7	1.3	1.9	0	0

Source: CMS social, disability audit 2006, \*excludes housewives only and students



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Unfortunately, the differently-abled persons are not seen as contributing to the economy but rather as dependents and recipients of charity and welfare of the family and that of society, little attention is paid to their empowerment through employment. The skills they are able to receive remain limited to those such as basket weaving, making paper bags and candle-making. Despite legislations and programmes and schemes, most of them remain uneducated and are not able to participate in society and lead an independent life.

The differently-abled are discriminated from the very beginning in the kind of education they receive. Many of them are considered worthy of being educated in informal schools only. Informal schools limit their opportunities as these lead them away from mainstream education and as mentioned earlier, they end up learning skills such as basket-weaving, candle-making, which do not provide much financial empowerment. However, the irony is that even in vocational training, the situation is not good. Only 1.5% and 3.6% of the differently-abled in rural areas and urban areas, respectively, had received vocational training in 2002.

In the CMS social's Disability Audit, out of the total interviewed respondents, only three had received vocational training. Out of those who had undergone vocational training, only one was doing the same kind of work that he was trained in. In Jharkhand, Chhattisgarh and UP, not even one respondent had undergone vocational training. In Bihar and Madhya Pradesh, only three and two respondents out of the total number, respectively, had undergone vocational training. The educated youth registered with Employment Exchanges are very few. Those availing unemployment and/or disability allowances are also very few. In Bihar, it was found that no one was availing unemployment allowance, and in Jharkhand, only 1% was doing so. The CMS social disability audit revealed that only 3-7% of the surveyed population in the six states was registered with Employment Exchange.

**Table 11: Disabled persons availing benefits**

	Bihar	Jharkhand	MP	Chhattisgarh	UP
Registered with Employment Exchange	7	7	5.5	3	4.5
Availing unemployment allowance (%)	0	1	9.5	NA	3.1
Availing disability allowance (%)	3	1	43.5	43.5	39.1

Source: CMS social disability audit 2006

As per the PWD Act, 3% of all government jobs are reserved for the differently-abled. There have been instances where despite qualifying for placements in the Public Service Commission after clearing exams and interviews, they have been refused entry.<sup>31</sup> The list of Government jobs that have been prepared is itself an incomplete and shoddy one in which several jobs did not get identified.<sup>32</sup>

The PWD Act is applicable only to government or government-sponsored institutions. Privatization of all sectors of the economy leaves out the differently-abled with few opportunities. In order to promote employment in the private sector, the PWD Act mandates the government to formulate and implement a scheme for providing incentives to such establishments whose work force is composed of 5% of persons with disabilities (Section 39). However, it is doubtful as to whether or not such incentives would ever be provided considering the private sector's

<sup>31</sup> Sridhar, Lalitha, 2004, 'Government discriminates against the disabled', *InfoChange News & Features*, January (Available at <http://infochangeindia.org/2004010171/Disabilities/Features/Government-discriminates-against-the-disabled-in-IAS-recruitment.html>)

<sup>32</sup> *Ibid.*

record of employing the differently-abled. In 1999, an NCPEDP survey of the top 100 corporate houses in the country in 1999 revealed that differently-abled employees represented only 0.4 percent of the workforce (0.54 per cent in the public sector, 0.28 per cent in the private sector and 0.05 per cent in multinational companies). Out of the 70 respondent companies, 20 companies did not employ any differently-abled person at all and only 10 were found to have 1% or above differently-abled employees. There was no company amongst the corporates in which even 2% of the workforce comprised differently-abled persons. The study concluded that even after three years of implementing a policy of job reservation for the differently-abled persons through a law, the targets achieved fall short grossly, to 13% of the desirable level. Even this level of achievement is only fulfilled through the employment of people with a relatively mild degree of disability.<sup>33</sup>

## 6.0 PWD Act: A Landmark Bypassed

The PWD Act came into effect in 1995. The Act was landmark legislation for the differently-abled. However, the degree of utilization of the various provisions in the Act remains low. The awareness of the rights of the differently-abled itself is doubtful. In the CMS social disability audit all six backward states showed poor results as far as awareness of rights was concerned.

**Table 12: Awareness of PWD Act 1995**

	Bihar	Jharkhand	MP	Chhattisgarh	UP
Awareness of PWD Act (%)	2	1.5	15	2	0.5
Aware of at least 1 Govt. scheme (%)	71	77	94	78	96.5
Beneficiary of any Govt. scheme (%)	8	11	60	48.5	32
Owning Disability Certificate (%)	43	34	60	57.5	47

Source: CMS social disability audit 2006

In Bihar and Chhattisgarh, only 2% of the population surveyed was aware of the PWD Act. In UP, only 1.5% was aware of this. The awareness of at least one Govt scheme was better in all states. However, the number of beneficiaries of any Govt scheme was low. In Bihar, Jharkhand and UP, less than 50% of the surveyed population of the differently-abled owned a disability certificate.

<sup>33</sup> Abidi, Javed, 1999, 'Current status of employment of disabled people in Indian industries', Disability Information Sources (Available at <http://www.dinf.ne.jp/doc/english/asia/resource/apdrj/z13jo0400/z13jo0410.html>)

A study was conducted by the All India Institute of Medical Sciences in 2004 to assess the degree and level of awareness of the main provisions of the Act among its beneficiaries and among various members of Rehabilitation Team who are in frequent contact with people with special needs.<sup>34</sup> Some of the findings were shocking. Eighty three percent of the differently-abled included in this survey did not know that there is an Act of Parliament for protection. Though many staff members were aware of most of the main provisions of the Act, few knew the details and how to avail them. Same was the case with the differently-abled. All in all, the study concluded that awareness of PWD Act was incomplete in Rehabilitation Team Members and negligible in the differently-abled. Out of the 36 differently-abled, 23 had disability certificates. However, among these 23, only 43.5% had used it at least once. There is surely a need for this under-utilisation to be probed into besides the lack of awareness of the legislation itself.

In the same study, respondents were asked about the benefits availed by them from government schemes. Researchers found that only 29.3% of the respondents in urban areas and 34.7% in rural had availed some of the benefits of the government schemes. To bolster employment of persons with disabilities in rural areas, the PWD Act has mandated that 3% budget in the poverty reduction schemes be earmarked (Section 40)<sup>35</sup>. Despite the various programmes and schemes run by the government, the study pointed to the fact that even after 11 years of passing of the Act, not much has been achieved.

## 7.0 The Ongoing Trajectory

There have been several shifts in approaches to disability, theoretically as well as in policy and implementation. The National Policy on Disabled Persons 2002 shifts the emphasis from medical rehabilitation to community-based rehabilitation.<sup>36</sup> In terms of theoretical approaches that provide a basis for policy and implementation, there has been a shift from the welfare approach to a human rights one. In the human rights model, every person has the right to participate fully in social institutions and avail fully of the services offered to a country's public, regardless of ability. In other words, governments have a



[debilitbangladeshorg.blogspot.com](http://debilitbangladeshorg.blogspot.com)

<sup>34</sup> Vijayakumar, S., and Singh, U., 2004, 'PWD Act: Awareness among beneficiaries and members of Rehabilitation Team', *Indian Journal of Physical Medicine and Rehabilitation (IJPMPR)* 15, pp 12-16, New Delhi

<sup>35</sup> NHRC

<sup>36</sup> A community-based approach is an approach that advocates for the community to undertake all aspects of rehabilitation. It is based on the idea that awareness generated from within the community rather than from NGOs makes more of an impact and brings about more improvement and greater acceptability.



duty to make mainstream institutions sensitive and flexible so that all persons, including those with disabilities, can make use of them.<sup>37</sup> The disability rights need to be mainstreamed into the human rights model, just as the development of the differently-abled needs to be integrated into the mainstream development agenda. The United Nations Convention on the Rights of People with Disabilities, which India has ratified, makes it mandatory for the government to adopt the human rights approach which would necessitate bringing about changes in all other laws like the recent right to education, employment and so on.

Despite Constitutional provisions, policies, legislations and international treaties and bodies that promise to protect and promote the rights of the differently-abled, much remains to be achieved in terms of operationalization. At the global level, the Millennium Development Goals have been set in order to address the problems of the poorest and most marginalised. Despite the fact that 20 per cent of global poverty is associated with disability, the differently-abled do not find any mention in any of the statements, guidelines, policies, programmes etc. related to the MDGs. Undoubtedly, 'development' has to be inclusive of the differently-abled and without their participation, development will remain incomplete. It has been realised that it is pertinent to mainstream disability in the goals and efforts of the MDGs for which ample opportunities exist.<sup>38</sup>

The strong voice of the disability movement, the shift to a human rights approach, a National Policy, international and national agreements and legislation, the inclusion of disability in the Census are all noteworthy moves towards mainstreaming disability. However, at the ground level, the pace of transition is slow. In the West, the concern is about equality and anti-discrimination legislation, whereas the differently-abled in developing countries remain trapped in meeting their survival needs in the context of widespread poverty. (Coleridge 1993 cited in Tursumani 2003<sup>39</sup>)

## 8.0 Some Action Points

As a participatory approach to prioritize the action points, CMS social's Disability audit solicited suggestions and recommendations by the differently-able respondents themselves. The respondents identified a range of measures. As emerged, the education related measures

<sup>37</sup> [nhrc.nic.in/Publications/DisabledRights.pdf](http://nhrc.nic.in/Publications/DisabledRights.pdf)

<sup>38</sup> 'Millennium Development Goals and Disability', United Nations Enable: Rights and Dignity of Persons With Disabilities (Available at <http://www.un.org/millenniumgoals/>)

<sup>39</sup> Tursumani, Majid, 2003, 'Poverty and Disabled People in Development Context: Examples from Jordan and Afghanistan', *Staying Poor: Chronic Poverty and Development Policy Conference, 7th-9th April 2003, Manchester, UK*



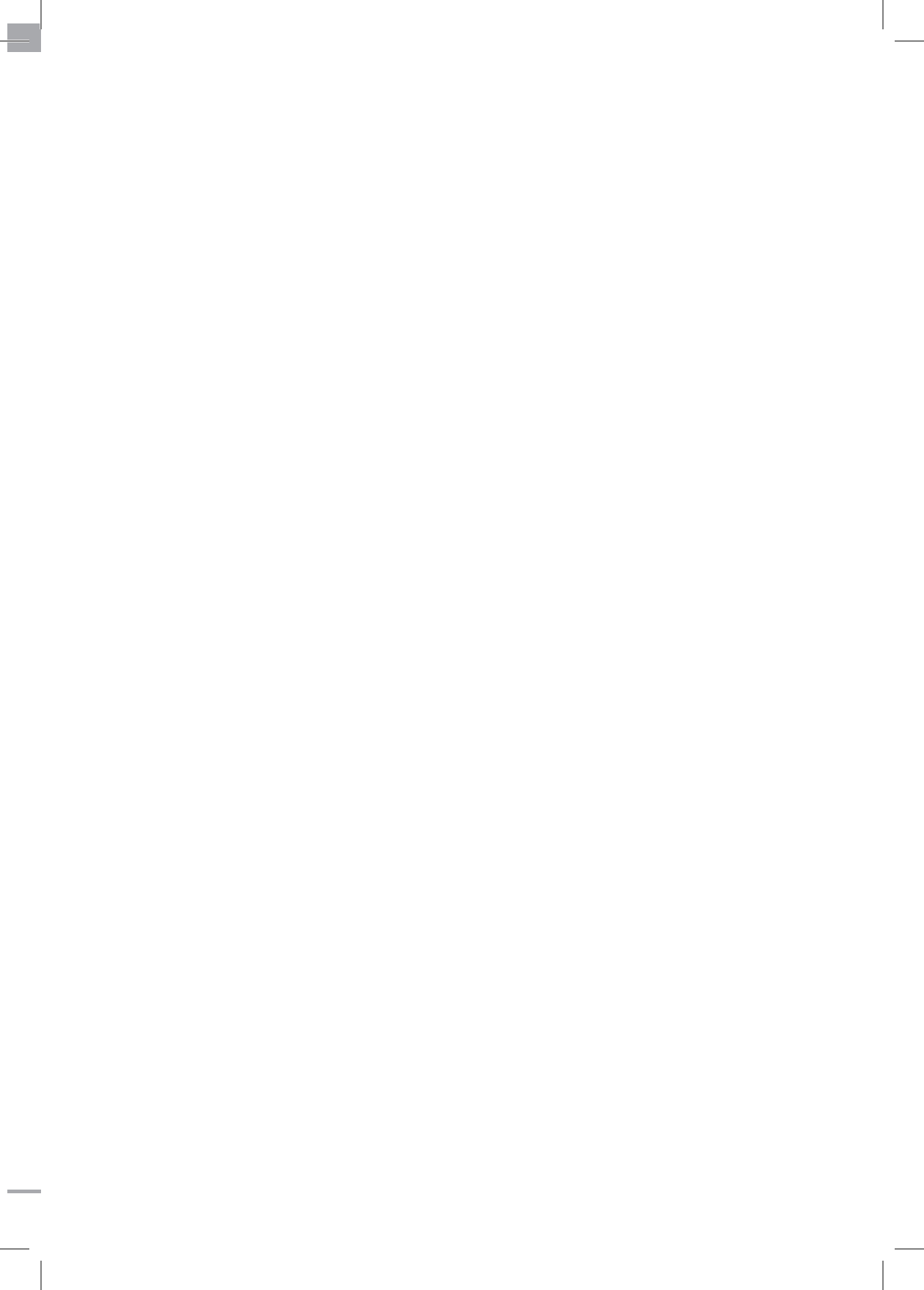
were given top priority. Understandably, a good education is expected to provide secure future for them. They suggested free education and accessibility to schools and classrooms, an increase in the amount of scholarship and in the number of special schools. To acquire a skill which will help them to become self-reliant, they suggested availability of vocational training institutes. Due to paucity of funds, many a times the differently-abled could not go for treatment or buy equipments and aids meant for them. Some suggestions included the provision of free treatment, free medicines, and arrangement for exclusive hospitals, counters and wards. Accessible and free and transport facility, an increase in the reserved seats in buses and trains for differently-abled were also suggested by the respondents. In government offices, they said that they would like to have separate counters and separate staff to attend to them and provide quick service and to take immediate action on their complaints, grievances and applications. Regarding public places, suggestions included special waiting spaces, separate seating and separate entry and exit gates. They also suggested that there be separate drinking water facilities for them and attendants. The provision for housing arrangements for homeless differently-abled was also made.

Some of the action points for improving the current provisions and prevailing condition of differently-abled at national and state levels are

- **Policy for differently-abled:** All states should frame and finalize the state level policy for differently-abled population with focus on inclusive education and employment. Rights-based and inclusive approach needs to be pursued with respect to all aspects of the life of the differently-abled population.
- **Definition of Differently-abled** should be uniform: Currently the definition of disability differs with context and also with reference to the institution gathering such data. It should be understood that such differences impact upon policies and programmes. Uniformity in definition of disability should be attempted. Public debates to arrive at the definition should be held.
- **Data on Differently-abled population** should be accurate: As noticed, different agencies including government surveys estimate different figures of differently-abled. Programmes and policies are hampered by paucity of data. Gathering data on differently-abled population against key human development indicators along with the information about degree of disability is very vital.
- **Developing participatory annual plans and budgets** for the differently-abled should be emphasized. There is a need for special focus on the backward regions and backward sections of the differently-abled and an increase in budget of these regions. All

policy papers and action plans should have special focus on the differently-abled. In order to mainstream disability, this is important. Pro-poor policies should include disability in more explicit ways.

- **Shift in developing differently-abled infrastructure:** The focus of development plans should shift from urban to rural areas. Since majority of differently-abled are in rural areas, funds should be allocated for establishing institutions such as special schools, vocational training institutes, especially in rural areas
- **Punitive measures against discrimination:** Incidents where despite qualifications, the differently-abled are denied opportunities should be investigated into and punitive measures should be taken. The private sector should also be brought under the purview.
- **Establish Grievance Redressal Cell:** A national level grievance redressal cell should be set up with toll-free telephone numbers to register complaint against any kind of harassment, exploitation and discrimination of differently-abled population.
- **Periodic assessment and review** of programmes and schemes needs to be undertaken. Currently, several mainstream schemes and programmes include the differently-abled. However, monitoring and evaluation does not give disaggregated data to show the extent of the inclusion of the differently-abled target population.





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