

STANDING COMMITTEE ON SOCIAL JUSTICE AND EMPOWERMENT (2022-2023)

(SEVENTEENTH LOK SABHA)

MINISTRY OF SOCIAL JUSTICE AND EMPOWERMENT (DEPARTMENT OF EMPOWERMENT OF PERSONS WITH DISABILITIES)

'Review of the functioning of National Institutes established for different types of disabilities'

FORTY-SECOND REPORT



LOK SABHA SECRETARIAT NEW DELHI

December, 2022/ Agrahayana, 1944 (Saka)

FORTY-SECOND REPORT

STANDING COMMITTEE ON SOCIAL JUSTICE AND EMPOWERMENT (2022-2023)

(SEVENTEENTH LOK SABHA)

MINISTRY OF SOCIAL JUSTICE AND EMPOWERMENT (DEPARTMENT OF EMPOWERMENT OF PERSONS WITH DISABILITIES)

'Review of the functioning of National Institutes established for different types of disabilities'

Presented to Lok Sabha on 16.12.2022

Laid in Rajya Sabha on 16.12.2022



LOK SABHA SECRETARIAT NEW DELHI

December, 2022/ Agrahayana, 1944 (Saka)

CONTENTS

| | | PAGE |
|---------------|--|------|
| | COMPOSITION OF THE COMMITTEE (2020-21) | (iv) |
| | INTRODUCTION | (vi) |
| | REPORT | |
| CHAPTER -I | INTRODUCTORY | 1 |
| CHAPTER- II | REGIONAL CENTRES AND COMPOSITE REGIONAL CENTRES | 12 |
| CHAPTER- III | BUDGETARY ALLOCATION vis-à-vis BENEFICIARIES | 20 |
| CHAPTER -IV | FACULTY/STAFF | 30 |
| CHAPTER-V | TRAINING COURSES AND RESEARCH PROJECTS | 36 |
| CHAPTER- VI | MENTAL HEALTH | 48 |
| CHAPTER- VII | MONITORING OF THE NATIONAL INSTIUTES | 54 |
| | ANNEXURES* | |
| ANNEXURE - I | | |
| ANNEXURE - II | | |
| ANNEXURE -III | | |
| | APPENDIX | |
| | Statement of Observations/Recommendations | 60 |

*Not appended with this cyclostyled copy.

COMPOSITION OF THE STANDING COMMITTEE ON SOCIAL JUSTICE AND EMPOWERMENT (2021-22)

SMT. RAMA DEVI - CHAIRPERSON

MEMBERS

Lok Sabha

- 2. Shri Deepak (Dev) Adhikari
- 3. Smt. Sangeeta Azad
- 4. Shri Bholanath 'B.P. Saroj'
- 5. Smt. Pramila Bisoyi
- 6. Shri Thomas Chazhikadan
- 7. Shri Chhatar Singh Darbar
- 8. Shri Y. Devendrappa
- 9. Smt. Maneka Sanjay Gandhi
- 10. Shri Hans Raj Hans
- 11. Shri K. Shanmuga Sundaram
- 12. Shri Abdul Khaleque
- 13. Smt. Ranjeeta Koli
- 14. Smt. Geeta Kora
- 15. Shri Vijay Kumar
- 16. Shri Akshaibar Lal
- 17. Shri V. Srinivas Prasad
- 18. Shri Arjun Singh
- 19. Smt. Supriya Sule
- 20. Smt. Rekha Verma
- 21. Shri Tokheho Yepthomi

<u>Rajya Sabha</u>

- 22. Smt. Ramilaben Becharbhai Bara
- 23. Shri Abir Ranjan Biswas
- 24. Smt. Geeta alias Chandraprabha
- 25. Shri N.Chandrasegharan
- 26. Shri Narayan Koragappa
- 27. Smt. Mamata Mohanta
- *28. Vacant
- **29. Vacant
- ***30. Vacant
- ****31. Vacant

** Smt. Jharna Das Baidya retired *w.e.f.* 02.04.2022

*** Smt. Chhaya Verma retired *w.e.f.* 29.06.2022

**** Shri Ramkumar Verma retired *w.e.f.* 04.07.2022

^{*} Shri M. Mohamed Abdulla Resigned *w.e.f* 16.03.2022

COMPOSITION OF THE STANDING COMMITTEE ON SOCIAL JUSTICE AND EMPOWERMENT (2022-23)

SMT. RAMA DEVI - CHAIRPERSON

MEMBERS Lok Sabha

- 2. Shri Deepak (Dev) Adhikari
- 3. Smt. Sangeeta Azad
- 4. Shri Bholanath (B.P. Saroj)
- 5. Smt. Pramila Bisoyi
- 6. Shri Thomas Chazhikadan
- 7. Shri Chhatar Singh Darbar
- 8. Smt. Maneka Sanjay Gandhi
- 9. Shri Hans Raj Hans
- 10. Shri Abdul Khaleque
- 11. Smt. Ranjeeta Koli
- 12. Smt. Geeta Kora
- 13. Shri Vijay Kumar
- 14. Shri Akshaibar Lal
- 15. Sardar Simranjit Singh Mann
- 16. Shri V. Sreenivasa Prasad
- 17. Smt. Supriya Sadanand Sule
- 18. Shri K. Shanmuga Sundaram
- 19. Smt. Rekha Arun Verma
- 20. Shri Devendrappa Y.
- 21. Shri Tokheho Yepthomi

<u>Rajya Sabha</u>

- 22. Smt. Sumitra Balmik
- 23. Smt. Ramilaben Becharbhai Bara
- 24. Shri Abir Ranjan Biswas
- 25. Smt. Geeta alias Chandraprabha
- 26. Shri N.Chandrasegharan
- 27. Shri Naryana Koragappa
- 28. Smt. Mamata Mohanta
- 29. Shri Ramji
- 30. Shri Anthiyur P. Selvarasu
- 31. Shri Mukul Balkrishna Wasnik

LOK SABHA SECRETARIAT

- 1. Smt.Anita B. Panda
- 2. Shri Ved Prakash Nauriyal
- 3. Smt. Mamta Kemwal
- 4. Shri Krishendra Kumar
- 5. Smt. Banani Sarker Joshi
- Additional Secretary
- Joint Secretary
- Director

-

-

-

- Deputy Secretary
- Under Secretary

INTRODUCTION

I, the Chairperson, Standing Committee on Social Justice and Empowerment (2022-23) having been authorized by the Committee to submit the Report on their behalf, do present this Forty- Second Report on 'Review of the functioning of National Institutes established for different types of disabilities' relating to the Ministry of Social Justice and Empowerment (Department of Empowerment of Persons with Disabilities).

2. The Committee took oral evidence of the representatives of the Ministry of Social Justice and Empowerment (Department of Empowerment of Persons with Disabilities) on 26.8.2021 and 11.7.2022. The observations and recommendations of the Committee are based on the evidence of the Ministry of Social Justice and Empowerment (Department of Empowerment of Persons with Disabilities).

3. The Report was considered and adopted by the Standing Committee on Social Justice and Empowerment at their sitting held on 14.12. 2022.

4. The Committee wish to express their thanks to the Officers of the Ministry of Social Justice and Empowerment (Department of Empowerment of Persons with Disabilities) for furnishing the written replies and other material/information and also for appearing before the Committee to tender their evidence in connection with the examination of the subject.

5. For facility of reference, observations/recommendations have been printed in bold in the body of this Report.

NEW DELHI;

<u>15 December, 2022</u> 24 Agrahayana, 1944 (Saka) RAMA DEVI Chairperson, Standing Committee on Social Justice and Empowerment

REPORT

NATIONAL INSTITUTES

CHAPTER-I

INTRODUCTORY

1.1 According to Census 2011, there are 2.68 crore persons with disabilities in India who constitute 2.21 percent of the total population. Out of the total population of persons with disabilities, approximately 1.50 crore are men and 1.18 crore are women. These include persons with visual, hearing, speech and loco-motor disabilities, mental illness, mental retardation (intellectual disabilities), multiple disabilities and other disabilities.

| Type of Disability | Persons | Males | Females | |
|---------------------|-------------|-------------------------|-------------------------|--|
| Movement | 54,36,826 | 33,70,501 | 20,66,325 | |
| Seeing | 50,33,431 | 26,39,028 | 23,94,403 | |
| Hearing | 50,72,914 | 26,78,584 | 23,94,330 | |
| Speech | 19,98,692 | 11,22,987 | 8,75,705 | |
| Mental Retardation | 15,05,964 | 8,70,898 | 6,35,066 | |
| Mental Illness | 7,22,880 | 4,15,758 | 3,07,122 | |
| Any Other | 49,27,589 | 27,28,125 | 21,99,464 | |
| Multiple Disability | 21,16,698 | 11,62,712 | 9,53,986 | |
| Total | 2,68,14,994 | 1,49,885,93 (55.89%) | 1,18,264,01 (44.11%) | |

1.2 The category wise number of Persons with Disabilities is as under:-

1.3 The State-wise population of Persons with Disabilities is as under:-

| S. No. | State | Total disabled population as per Census 2011 |
|--------|-------------------|--|
| 1 | Andhra Pradesh | 1219785 |
| 2 | Arunachal Pradesh | 26,734 |
| 3 | Assam | 4,80,065 |
| 4 | Bihar | 23,31,009 |

| 6 Delhi 2,34,882 7 Goa 33,012 8 Gujarat 10,92,302 9 Haryana 5,46,374 10 Himachal Pradesh 1,55,316 11 J&K 3,61,153 12 Jharkhand 7,69,980 13 Karnataka 13,24,205 14 Kerala 7,61,843 15 Madhya Pradesh 15,51,931 16 Maharashtra 29,63,392 17 Manipur 58,547 18 Mizoram 15,160 19 Meghalaya 44,317 20 Nagaland 29,631 21 Odisha 12,44,402 22 Punjab 6,54,063 23 Rajasthan 15,63,694 24 Sikkim 18,187 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttarakhand </th <th>5</th> <th>Chhattisgarh</th> <th>6,24,937</th> | 5 | Chhattisgarh | 6,24,937 |
|--|----|------------------|-------------|
| 8 Gujarat 10,92,302 9 Haryana 5,46,374 10 Himachal Pradesh 1,55,316 11 J&K 3,61,153 12 Jharkhand 7,69,980 13 Karnataka 13,24,205 14 Kerala 7,61,843 15 Madhya Pradesh 15,51,931 16 Maharashtra 29,63,392 17 Manipur 58,547 18 Mizoram 15,160 19 Meghalaya 44,317 20 Nagaland 29,631 21 Odisha 12,44,402 22 Punjab 6,54,063 23 Rajasthan 15,63,694 24 Sikkim 18,187 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 | 6 | Delhi | 2,34,882 |
| 9 Haryana 5,46,374 10 Himachal Pradesh 1,55,316 11 J&K 3,61,153 12 Jharkhand 7,69,980 13 Karnataka 13,24,205 14 Kerala 7,61,843 15 Madhya Pradesh 15,51,931 16 Maharashtra 29,63,392 17 Manipur 58,547 18 Mizoram 15,160 19 Meghalaya 44,317 20 Nagaland 29,631 21 Odisha 12,44,402 22 Punjab 6,54,063 23 Rajasthan 15,63,694 24 Sikkim 18,187 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 | 7 | Goa | 33,012 |
| 10 Himachal Pradesh 1,55,316 11 J&K 3,61,153 12 Jharkhand 7,69,980 13 Karnataka 13,24,205 14 Kerala 7,61,843 15 Madhya Pradesh 15,51,931 16 Maharashtra 29,63,392 17 Manipur 58,547 18 Mizoram 15,160 19 Meghalaya 44,317 20 Nagaland 29,631 21 Odisha 12,44,402 22 Punjab 6,54,063 23 Rajasthan 15,63,694 24 Sikkim 18,187 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 <td>8</td> <td>Gujarat</td> <td>10,92,302</td> | 8 | Gujarat | 10,92,302 |
| 11 J&K 3,61,153 12 Jharkhand 7,69,980 13 Karnataka 13,24,205 14 Kerala 7,61,843 15 Madhya Pradesh 15,51,931 16 Maharashtra 29,63,392 17 Manipur 58,547 18 Mizoram 15,160 19 Meghalaya 44,317 20 Nagaland 29,631 21 Odisha 12,44,402 22 Punjab 6,54,063 23 Rajasthan 15,63,694 24 Sikkim 18,187 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D&N Haveli 3,294 <td>9</td> <td>Haryana</td> <td>5,46,374</td> | 9 | Haryana | 5,46,374 |
| 12 Jharkhand 7,69,980 13 Karnataka 13,24,205 14 Kerala 7,61,843 15 Madhya Pradesh 15,51,931 16 Maharashtra 29,63,392 17 Manipur 58,547 18 Mizoram 15,160 19 Meghalaya 44,317 20 Nagaland 29,631 21 Odisha 12,44,402 22 Punjab 6,54,063 23 Rajasthan 15,63,694 24 Sikkim 18,187 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1, | 10 | Himachal Pradesh | 1,55,316 |
| 13 Karnataka 13,24,205 14 Kerala 7,61,843 15 Madhya Pradesh 15,51,931 16 Maharashtra 29,63,392 17 Manipur 58,547 18 Mizoram 15,160 19 Meghalaya 44,317 20 Nagaland 29,631 21 Odisha 12,44,402 22 Punjab 6,54,063 23 Rajasthan 15,63,694 24 Sikkim 18,187 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,1 | 11 | J&K | 3,61,153 |
| 14 Kerala 7,61,843 15 Madhya Pradesh 15,51,931 16 Maharashtra 29,63,392 17 Manipur 58,547 18 Mizoram 15,160 19 Meghalaya 44,317 20 Nagaland 29,631 21 Odisha 12,44,402 22 Punjab 6,54,063 23 Rajasthan 15,63,694 24 Sikkim 18,187 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 <td>12</td> <td>Jharkhand</td> <td>7,69,980</td> | 12 | Jharkhand | 7,69,980 |
| 15 Madhya Pradesh 15,51,931 16 Maharashtra 29,63,392 17 Manipur 58,547 18 Mizoram 15,160 19 Meghalaya 44,317 20 Nagaland 29,631 21 Odisha 12,44,402 22 Punjab 6,54,063 23 Rajasthan 15,63,694 24 Sikkim 18,187 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 13 | Karnataka | 13,24,205 |
| 16 Maharashtra 29,63,392 17 Manipur 58,547 18 Mizoram 15,160 19 Meghalaya 44,317 20 Nagaland 29,631 21 Odisha 12,44,402 22 Punjab 6,54,063 23 Rajasthan 15,63,694 24 Sikkim 18,187 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 14 | Kerala | 7,61,843 |
| 17 Manipur 58,547 18 Mizoram 15,160 19 Meghalaya 44,317 20 Nagaland 29,631 21 Odisha 12,44,402 22 Punjab 6,54,063 23 Rajasthan 15,63,694 24 Sikkim 18,187 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 15 | Madhya Pradesh | 15,51,931 |
| 18 Mizoram 15,160 19 Meghalaya 44,317 20 Nagaland 29,631 21 Odisha 12,44,402 22 Punjab 6,54,063 23 Rajasthan 15,63,694 24 Sikkim 18,187 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 16 | Maharashtra | 29,63,392 |
| 19 Meghalaya 44,317 20 Nagaland 29,631 21 Odisha 12,44,402 22 Punjab 6,54,063 23 Rajasthan 15,63,694 24 Sikkim 18,187 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 17 | Manipur | 58,547 |
| 20 Nagaland 29,631 21 Odisha 12,44,402 22 Punjab 6,54,063 23 Rajasthan 15,63,694 24 Sikkim 18,187 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 18 | Mizoram | 15,160 |
| 21 Odisha 12,44,402 22 Punjab 6,54,063 23 Rajasthan 15,63,694 24 Sikkim 18,187 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D&N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 19 | Meghalaya | 44,317 |
| 22 Punjab 6,54,063 23 Rajasthan 15,63,694 24 Sikkim 18,187 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 20 | Nagaland | 29,631 |
| 23 Rajasthan 15,63,694 24 Sikkim 18,187 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 21 | Odisha | 12,44,402 |
| 24 Sikkim 18,187 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 22 | Punjab | 6,54,063 |
| 25 Tamil Nadu 11,79,963 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 23 | Rajasthan | 15,63,694 |
| 26 Telangana 10,46,822 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 24 | Sikkim | 18,187 |
| 27 Tripura 64,346 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 25 | Tamil Nadu | 11,79,963 |
| 28 Uttar Pradesh 41,57,514 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 26 | Telangana | 10,46,822 |
| 29 Uttarakhand 1,85,272 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 27 | Tripura | 64,346 |
| 30 West Bengal 20,17,406 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 28 | Uttar Pradesh | 41,57,514 |
| 31 A&N Islands 6,660 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 29 | Uttarakhand | 1,85,272 |
| 32 Chandigarh 14,796 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 30 | West Bengal | 20,17,406 |
| 33 Daman & Diu 2,196 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 31 | A&N Islands | 6,660 |
| 34 D& N Haveli 3,294 35 Lakshadweep 1,615 36 Puducherry 30,189 | 32 | Chandigarh | 14,796 |
| 35 Lakshadweep 1,615 36 Puducherry 30,189 | 33 | Daman & Diu | 2,196 |
| 36 Puducherry 30,189 | 34 | D& N Haveli | 3,294 |
| | 35 | Lakshadweep | 1,615 |
| Total 2,68,14,994 | 36 | Puducherry | 30,189 |
| | | Total | 2,68,14,994 |

1.4 The following legislations for the welfare and empowerment of persons with disabilities have been enacted by Government of India:-

(i) <u>The Rehabilitation Council of India Act, 1992</u>

The Rehabilitation Council of India was set up under the Rehabilitation Council of India Act, 1992 to regulate and monitor the training of rehabilitation professionals and personnel and to promote research in rehabilitation and special education.

(ii) <u>The National Trust for the Welfare of Persons with Autism, Cerebral Palsy,</u> <u>Mental Retardation and Multiple Disabilities Act, 1999.</u>

Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act, 1999 extend support to registered organizations, promote measures for the care and protection of persons with disabilities etc.

(iii) The Rights of Persons with Disabilities Act, 2016 (RPwD Act, 2016)

India has aligned its national law on Persons with Disabilities namely, The Rights of Persons with Disabilities Act, 2016 with various provisions of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD). The Act came into force on April 19, 2017. Following 21 categories of disabilities have been recognized under the Rights of Persons with Disabilities Act, 2016:-

| Earlier Identified | Newly Added | | | |
|--|-----------------------------------|------------------------------------|--|--|
| Locomotors Disability | Muscular Dystrophy | Chronic Neurological Conditions | | |
| Blindness | Dwarfism | Multiple Sclerosis | | |
| Low Vision | Cerebral Palsy | Parkinson's Disease | | |
| Hearing Impairment | Acid Attack Victims | Hemophilia | | |
| Leprosy Cured | Speech and Language Disability | Thalassemia | | |
| Intellectual Disability <i>(Earlier MR</i>) | Specific Learning Disability | Sickle Cell Disease | | |
| Mental Illness | Autism Spectrum Disorder | Multiple Disabilities | | |

NATIONAL INSTITUTES

1.5 The Government of India has established nine autonomous National Institutes under the administrative control of Ministry of Social Justice and Empowerment (Department of Empowerment of Persons with Disabilities) to cater to the different disabilities. As mandated, these Institutes develop human resources in the field of disability, provide rehabilitation services to the persons with disabilities, conduct research etc. The brief introduction and objectives of these nine National Institutes is as under:-

A. Pt. Deendayal Upadhayay National Institute for Persons with Physical Disabilities (PDUNIPPD), New Delhi

The Institute established in year 1975, is committed to the rehabilitation of persons with locomotor disabilities like poliomyelitis, cerebral palsy, traumatic deformities, brain stroke cases etc.

Aims and Objectives

- i. To undertake the training of Physiotherapists, Occupational Therapists, Prosthetists & Orthotists and other such professionals needed for providing services to the disabled persons.
- ii. To offer education, training, work-adjustment and such other rehabilitation services as may be needed by orthopedically disabled persons with or without associated mental retardation.
- iii. To undertake the manufacturing and distribution of such aids and appliances as are needed for the education, training and rehabilitation of the disabled persons.
- iv. To provide such other services as may be considered appropriate for promoting the education and rehabilitation of the disabled persons, including organizing meetings, seminars and symposia.
- v. To undertake, initiate, sponsor or stimulate research aimed at developing more effective techniques for the education and rehabilitation of the disabled persons.

B. Swami Vivekanand National Institute of Rehabilitation Training and Research (SVNIRTAR), Cuttack

The institute is located at Olatpur in Cuttack District, Odisha. It was established in 1975 as National Institute for Prosthetic and Orthotic Training (NIPOT) an adjunct unit of Artificial Limbs Manufacturing Corporation of India (ALIMCO), Kanpur. NIPOT was brought under the Ministry of Social Justice and Empowerment (the erstwhile Ministry of Welfare), Govt. of India on February 22, 1984 to give a thrust to Community Based Rehabilitation and Human Resource Development. Since then, it is an Autonomous Body under the administrative control of the Ministry of Social Justice and Empowerment (Department of Empowerment of Persons with Disabilities). Its name was changed from NIPOT to NIRTAR in 1984 and subsequently to SVNIRTAR in the year 2004. It is one of the premier Institutes in the Country for providing comprehensive rehabilitation services to the Persons with Locomotor Disabilities.

Aims and Objectives:

- i. Long term, short term courses, training for rehabilitation personnel such as Doctors, Engineers, Prosthetics, Orthotics, Physiotherapists, Occupational Therapists, Multipurpose Rehabilitation Therapists and other personnel for the rehabilitation of the physically disabilities.
- ii. Promotion, distribution and subsidizing the manufacture of prototype designed aids and appliances.
- iii. Development of models of service delivery programmes in the field of locomotor disability.
- iv. Vocational training, placement and rehabilitation of the physically disabilities.
- v. To conduct and coordinate research activities on Bio-medical Engineering leading to the effective evaluation and standardization of the mobility aids for the orthopedically disabled persons or suitable surgical or medical procedures and for standardization.
- vi. Extension and Outreach Services.

C. National Institute for Locomotors Disabilities (NILD), Kolkata

In the year 1978, the National Institute for Locomotors Disabilities (NILD) erstwhile National Institute for the Orthopedically Handicapped (NIOH) was established in Calcutta, West Bengal under the then Ministry of Social Welfare, Government of India as an autonomous body. NILD supports and enables persons with locomotors disabilities to optimize their potential and to realize their right to live life on an equal basis with their non-disabled peers through rehabilitation management, education, training, research and human resource development.

Aims and Objectives:

- i. To conduct/sponsor, co-ordinate or subsidize research in all aspects of the education and rehabilitation of persons with locomotor disabilities with problems of coordination or mobility.
- ii. To undertake, sponsor, co-ordinate or subsidize research in biomedical engineering leading to the effective evaluation and standardization of aids or suitable surgical or medical procedures or the development of new aids.
- iii. To undertake or sponsor the training of trainees and teachers, employment officers, psychologists, vocational counselors and such other personnel as may be deemed necessary by the Institute for promoting education, training or rehabilitation of the locomotor disabilities.
- iv. To distribute, promote or subsidize the manufacture and distribution of any or all aids designed to promote any aspects of the education, rehabilitation or therapy of persons with locomotors disabilities.

D. National Institute for the Empowerment of Persons with Visual Disabilities, (NIEPVD), Dehradun

The National Institute for the Empowerment of Persons with Visual Disabilities (Divyangjan) (NIEPVD) at Dehradun, set up in 1979, is a premier institute in the field of visual disability with the primary objective to empower and enable persons with visual impairment to take part in all aspects of community life since the last 75 years.

Aims and Objectives

- i. To conduct and sponsor programmes for training of teachers, O&M instructors and to undertake capacity building of field functionaries and service providers of mainstream institutions of the society.
- ii. To conduct, sponsor, coordinate and/or subsidise research into various dimensions of the education and rehabilitation of the visually impaired persons.
- iii. To distribute, promote, or subsidise the manufacturing of prototypes and to manage distribution of any or all devices designed to promote any aspect of the education, rehabilitation or employment of the visually impaired persons.
- iv. To design and develop models of education, vocational training and other rehabilitation services to ensure minimum standards and wide coverage.

E. Ali Yavar Jung National Institute of Speech and Hearing Disabilities (Divyangjan), Mumbai (AYJNISHD)

The Institute was established on August, 1983 primarily to deal with the various aspects of rehabilitation of the Individuals with speech and hearing disabilities in the country.

Aims and Objectives:

- i. To conduct, sponsor, coordinate or subsidize research into all aspects of education and rehabilitation of the persons with hearing impairment.
- ii. To undertake, sponsor, coordinate or subsidize research into biomedical engineering leading to the effective evaluation of aids or suitable surgical or medical procedures or development of new aids.
- iii. To undertake or sponsor the training of trainees, teachers, employment officers, psychologists, vocational counsellors and such other personnel as may be deemed necessary by the Institute for promoting education, training and rehabilitation of the persons with hearing impairment.
- iv. To distribute or promote or subsidize the manufacture of prototypes and distribution of any or all aids designed to promote any aspect of education, rehabilitation and therapy for persons with hearing impairment.

F. National Institute for the Empowerment of Persons with Intellectual Disabilities (Divyangjan) (NIEPID), Secunderabad

The Institute was established in the year 1984 as an autonomous body under the Department of Empowerment of Persons with Disabilities (Divyangjan), Ministry of Social Justice and Empowerment. The institute is an apex body having tripartite functions of training, research and services in the field of Intellectual Disability in the country. For 37 years, the Institute has been making significant advances in building capacities to empower persons with Intellectual Disability.

NIEPID strives to be an Institute of excellence focusing on high standards in every aspect of its functioning to bring equality and dignity in the lives of persons with Intellectual Disability (PwID) which is endorsed by ISO 9001:2015 certification.

Aims and Objectives:

- i. To create manpower and develop Human Resources for delivery of services to Persons with Intellectual Disability.
- ii. To identify, conduct and coordinate research in the area of Intellectual Disability in the country.
- iii. To develop appropriate models of care and habilitation for persons with Intellectual Disability suitable to Indian culture.
- iv. To provide consultancy services to voluntary organizations in the area of Intellectual Disability.
- v. To serve as a documentation and information centre in the area of Intellectual Disability.
- vi. To develop community-based rehabilitation services in the rural and lowincome needy population.
- vii. To undertake extension and outreach programmes in the field of Intellectual Disability.

G. National Institute for Empowerment of Persons with Multiple Disabilities (DIVYANGJAN) (NIEPMD), Chennai

The Institute was established in the year 2005 at Muttukudu, Chennai in Tamil Nadu to fulfill the objective of serving as a national resource centre for empowerment of persons with Multiple Disabilities.

Aims and Objectives:

i. To undertake development of human resource for management, training, rehabilitation, education, employment and social development of persons with Multiple Disabilities.

- ii. To promote and conduct research in all areas relating to Multiple Disabilities.
- iii. To develop Trans disciplinary models and strategies for social rehabilitation and to meet the needs of diverse groups of people with Multiple Disabilities.
- iv. To undertake services and outreach programmes for the persons with Multiple Disabilities.

H. Indian Sign Language Research and Training Centre (ISLRTC)

The Government has established Indian Sign Language Research and Training Centre (ISLRTC) as a Society under the Societies Registration Act, 1860, in September, 2015. It is functioning in Okhla, New Delhi.

Aims and Objectives:

- i. To develop manpower for using, teaching and conducting research in Indian Sign language (ISL) including Bilingualism (i.e. Sign Language + Writing).
- ii. To promote the use of Indian Sign Language as an Educational mode for Hearing Impaired students at Primary, Secondary and Higher Education levels. The Institute shall work out modalities with the Ministry of Human Resources Development and State Education Departments.
- iii. To carry out research in collaboration with Universities and other Educational Institutions in India and abroad, and create Linguistic records/analysis of the ISL, including creation of Indian Sign Language corpus (vocabulary).
- iv. To orient and train various groups, i.e. Government officials, Teachers, Professionals Community leaders and the public at large for understanding and using Indian Sign Language.
- v. To collaborate with Organizations of the Deaf and other institutions in the field of disability to promote and propagate Indian Sign Language.
- vi. To collect information relating to Sign Language, used in other parts of the world, so that their inputs can be utilized for upgrading the Indian Sign Language.

I. National Institute of Mental Health Rehabilitation (NIMHR) Sehore, Madhya Pradesh

The proposal of establishment of National Institute of Mental Health Rehabilitation (NIMHR) at Sehore, Madhya Pradesh was approved in Cabinet in 2018 with an estimated cost of ₹ 179.54 crore. It has been registered as a society under Madhya Pradesh Society Registration Act, 1973 on 28th May 2019, with the objective to promote mental health rehabilitation using an integrated multidisciplinary approach and developing trained professionals in the area of mental health rehabilitation. Its permanent building is under construction on a piece of 25 acre of land allotted by the Government of Madhya Pradesh along Bhopal-Sehore highway in Madhya Pradesh.

At present NIMHR is functional from a temporary accommodation provided by the Govt. of Madhya Pradesh at 'Old Zila Panchayat Bhawan', Sehore. It is providing rehabilitation and clinical services &also runs Certificate Course in Care Giving (CCCG Mental Health), Diploma in Community Based Rehabilitation (DCBR) and Diploma in Vocational Rehabilitation- Intellectual Disability (DVR-ID).

Aims & Objectives:

- i. Rehabilitation services for the Persons with Mental Illness and developing standards for mental health rehabilitation.
- ii. Develop human resources for the field of mental health rehabilitation.
- iii. Engage in policy framing and advance research.

1.6 As regards to the role and functions of the National Institutes, the Secretary Department of Empowerment of Persons with Disabilities deposed before the Committee that:-

"नैशनल इन्स्ट्रियूट्स का पहला ऑब्जेक्टिव रीहैबिलिटेशन सर्विसेज़ प्रदान करना है। इसमें उनका मेन कार्य अर्ली-आईडेंटिफिकेशन और इंटरवेंशन का है। दूसरा मेन कार्य रीहैबिलिटेशन प्रोफेशनल्स एंड पर्सनल्स को तैयार करना है, क्योंकि यह एक ऐसी स्पेसिफिक फील्ड हैं, जिसमें एक डिफरेंट टाइप का कोर्स होता है और उसकी ट्रेनिंग दी जाती है। अत: उन पर्सनल्स को तैयार करने की जिम्मेदारी भी नैशनल इन्स्ट्रियूट्स को सौंपी गई है।"

1.7 On being enquired, whether it is a fact that there is a proposal to close down some of the National Institutes, the Secretary, Department of Empowerment of Persons with Disabilities informed the Committee during the Meeting of the Committee that:-

"It is not true Basically, it is the clustering that we are talking about."

1.8 On being asked to explain the clustering of the Institutes, the Secretary stated in the deliberation of the Committee that:-

"It's activities will remain as it is, rather it will progress further. This is how we have planned. Basically, clustering is not to hamper any Regional Centre's or CRC activities or even Institutes activities. What is happening is this. We are all working in Silos."

1.9 When asked about the current status of clustering of National Institutes, the Secretary informed the Committee during the course of evidence that:-

"process is under consideration. In that, we will definitely take care of, what we call, autonomy, individuality and speciality of every Institute. No institute is going to be closed. That is there. A cluster does not mean that we are closing them. It may be the administrative structure which will get altered a little bit. I am saying it in the Standing Committee that no institute will be closed down."

1.10 The Committee note that three Legislations viz. The Rehabilitation Council of India Act, 1992; The National Trust for the Welfare of Persons with Autism, Celebral Palsy, Mental Retardation and Multi Disabilities Act, 1999 and The Rights of Persons with disabilities Act, 2016 for the Welfare and Empowerment of persons with various disabilities have been enacted. The Committee further note that nine autonomous National Institutes have been established since 1975 under the administrative control of Ministry of Social Justice and Empowerment (Department of Empowerment of Persons with Disabilities) to develop human resources in the field of disability, provide rehabilitation services to the persons with disabilities, conduct research, etc. for the identified 21 disabilities. The Committee strongly feel that these efforts of Government of India are commendable as their aim is to enable the divyangian live their lives in a better rehabilitation facilities available way through under the various Acts/Schemes/Orgnisations meant for the welfare of disabled persons. In this connection the Committee observed from some reports that few National Institutes are likely to be merged/ closed. However, later they were assured by the Secretary, Department of Empowerment of Persons with Disabilities during the evidence before the Committee, that no National Institute is going to be closed down. The Committee were, however, informed that the process of clustering of Institutes have been started and due to this process, the activities of the Institutes will further progress and the autonomy, individuality and speciality

of any Institute will not be adversely affected except for the alteration in the administrative structure. In view of the assurance given by the Secretary, the Committee believe that no action would be taken by the Department which is detrimental for the Institutes as well as for the welfare of disabled persons. They would like to be apprised of the status of the said clustering exercise at action taken stage.

1.11 The Committee find that the figure of total Divyangjan population of 2.68 crore is based on the 2011 census and express their concern whether it is actually reflective of current status of disabled population. The Committee feel that the actual number of disabled persons could be much higher, as the available figure is more than 10 years old. Therefore, they believe that the Department is aware of the estimated number of PwDs in the country today in order to project a realistic assessment of resources required, allocation of funds and set reasonable targets. This will also hold true for the requirement of trained professional such as physiotherapists, counsellors, doctors, paramedics, etc. where actual numbers, in all probability, is not commensurate to the requirement. The Committee, therefore, urge the Department to take into cognizance their observation while setting further outcomes, and strive to make all NIs optimally functional for the Divyang population.

<u>CHAPTER- II</u>

REGIONAL CENTRES AND COMPOSITE REGIONAL CENTRES

2.1 In order to provide rehabilitation services in the field of specialization 11 Regional Centres of different National Institutes have been established at various places. Some of them also conduct human resource development Courses. In addition to Regional Centre's some National Institutes also have Composite Regional Centre for Skill Development, Rehabilitation & Empowerment of Persons with Disabilities (CRCs) under their administrative control. These have been set up in different States from the year 2000 onwards as outreach/ extension centres of respective National Institutes to extend the coverage of rehabilitation services to all categories of Persons with Disabilities under one roof with limited use of infrastructure and manpower.

| SI. No | National Institutes (NIs) | Year when set up | Regional Centres /Regional Chapters (RCs) | Composite Regional Centres (Approved in the year) |
|-----------|---|------------------------|--|--|
| 1 | Pt. Deendayal Upadhayay National Institute for Persons with Physical Disabilities (PDUNIPPD), New Delhi | 1975 | Regional Centre, Secunderabad | CRC in Lucknow (2000) and Srinagar (2000) |
| 2 | Swami Vivekanand National Institute of Rehabilitation Training and Research (SVNIRTAR), Cuttack | 1975 | None | CRC in Guwahati (2001), Ranchi (2017), Balangir (2018) and Imphal (2020) |
| 3 | National Institute for Locomotor Disabilities (NILD), Kolkata | 1978 | Regional Centre in Dehradun and Aizawl | CRC in Patna (2009), Naharlagoon (2016) and Agartala (2017) |
| 4 | National Institute for the Empowerment of Persons with Visual Disabilities (NIEPVD),Dehradun | 1979 | Regional Centre, Chennai | CRC in Sundernagar (2001), Gorakhpur (2018) and Gangtok (2018) |
| 5 | Ali Yavar Jung National Institute of Speech and Hearing Disabilities (AYJNISHD),Mumbai | 1983 | Regional Centre in Kolkata, Secunderabad, Noida and Jalna | CRC in Bhopal (2000), Ahmedabad (2011) and Nagpur (2016) |
| 6 | National Institute for the Empowerment of Persons with Intellectual Disabilities (NIEPID), Secunderabad | 1984 | Regional Centre in Noida, Navi Mumbai and Kolkata | CRC in Nellore (2015), Rajnandangaon (2015) and |

2.2 The details of Regional Centres and Composite Regional Centre are as follows:-

| | | | | Davangere (2016) |
|---|---|------|------|---|
| 7 | National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD), Chennai | 2005 | None | CRC in Kozhikode (2012), Shillong (2019) and Port Blair (2019) |
| 8 | Indian Sign Language Research and Training Centre (ISLRTC), Delhi | 2015 | None | None |
| 9 | National Institute of Mental Health Rehabilitation (NIMHR), Sehore | 2019 | None | None |

2.3 When asked about the functions of Regional Centres, the Department informed that the Regional Centres of Institutes primarily provide rehabilitation services in the field of specialization of respective Institute and some of them also conduct HRD courses. So far 11 Regional Centres of different National Institutes have been set up.

2.4 As regards setting up of new Composite Regional Centers(CRCs), the Committee were informed by the Department *vide* written reply that since 2014-15 following 13 new CRCs have been approved by the Government:-

- (i) "CRC at Rajnandgaon (Chattisgarh) in 2015
- (ii) CRC at Nellore (Andhra Pradesh) in 2015
- (iii) CRC at Davangere (Karnataka) in 2016
- (iv) CRC at Nagpur (Maharashtra) in 2016
- (v) CRC at Naharlagun (Arunachal Pradesh) in 2016
- (vi) CRC at Agartala (Tripura) in 2017
- (vii) CRC at Ranchi (Jharkhand) in 2017
- (viii) CRC at Gorakhpur (Uttar Pradesh) in 2018
- (ix) CRC at Balangir (Odisha) in 2018
- (x) CRC at Gangtok (Sikkim) in 2018
- (xi) CRC at Port Blair (A&N Islands) in 2019
- (xii) CRC at Shillong (Meghalaya) in 2019
- (xiii) CRC at Imphal (Manipur) in 2020"

2.5 With regard to the steps taken to set up these CRCs and the time by which they are expected to start functioning, the Committee were *inter-alia* informed by the Department that:-

"The Department establishes CRC in State/Union Territory based on the demand and requirement subject to the provision of required land and temporary accommodation, free of cost, by the concerned States/UTs. The cost of establishment and running of the CRC is fully borne by the Department. So far, 21 CRCs have been approved in various states/UTs. Further, proposal to set up some new CRCs is under consideration."

2.6 On being enquired about the role and functions of CRCs, the Secretary, Department of Empowerment of Persons with Disabilities stated during the course of evidence that:-

"इनका मेन कार्य एक्सटेंशन आउटरीच का है, क्योंकि हर जगह नैशनल इन्स्ट्रियूट्स नहीं हो सकते हैं, इसलिए डिफरेंट नैशनल इन्स्ट्रियूट्स की सेवाएं हम कम्पोज़िट रीजनल सेंटर्स के माध्यम से प्रोवाइड करने की कोशिश कर रहे हैं।"

2.7 She further added that:-

"कम्पोजिट रीहैबिलिटेशन सेंटर्स के माध्यम से सभी डिसेबिलिटीज़ से पीड़ित लोगों को सर्विसेज़ प्रदान करने की कोशिश की जाती है। इसके साथ ही रीहैबिलिटेशन प्रोफेशनल्स, वर्कर्स और फन्कशनिरीज़ को भी ट्रेन किया जाता है। रीहैबिलिटेशन का काम बहुत ही टैक्निकल होता है, इसलिए उसकी बाकायदा ट्रेनिंग यहां से की जाती है। इसी तरह उन्हीं पर्सनल्स को ट्रेन करने के लिए एजुकेशन और स्क्लिडेवलपमेंट का प्रोग्राम भी सीआरसीज़ के माध्यम से चलाया जाता है। ये अवेयरनेस क्रिएट करने का काम कर रहे हैं, जो कि सबसे बड़ा काम है। डिसेबिल्ड और चैलेन्जड व्यक्ति और उसके पैरेन्ट्स के लिए उसकी समावेशी प्रगति के लिए कम्युनिटी में अवेयरनेस क्रिएट करना भी एक अत्यंत महत्वपूर्ण काम है, जोकि सीआरसीज़ निभा रहे हैं।"

2.8 On being asked whether the infrastructure with regard to CRCs is sufficient to meet the requirement of Centers for their smooth functioning, the Department in their written reply submitted that:-

- (i) Infrastructure with regard to CRC, Lucknow of PPUNIPPD is not sufficient.
- (ii) Construction of G + 1, 100 bedded Hostel Building of CRC, Patna of NILD, Kolkata is in the process and likely to be completed by August, 2022.
- (iii) Additional new building of CRC, Sundernagar, (NIEPVD) and new Building of CRC, Gorakhpur (NIEPVD) is expected to be completed by March, 2022.
- (iv) Infrastructure with regard to Regional Centres and CRC's of AYJNISHD, Mumbai is as under:-
 - (a) RC, Noida is functioning on the infrastructure of NIEPID, RC on rental basis.

- (b) CRC Ahmedabad: The construction work of the office building is almost at completion stage.
- (c) CRC Nagpur: The land for construction of permanent building is already allocated to CRC Nagpur. CRC Nagpur is in the process of settling the land tax issues and to initiate the construction work. Budget approval is already made.
- (v) The CRCs at Davangere and Rajnandgoan are presently functioning from temporary buildings allocated by the respective State Governments. Since, the existing infrastructure is not sufficient, the DEPwD has approved the construction of permanent buildings on the lands allocated by the State Governments free of cost. The first installments of funds have been released to CPWD and the construction would be completed within 2 years.
- (vi) Area for running ISLRTC has been taken on lease at NSIC Okhla in 2021.

2.9 The Composite Regional Centres (CRCs) have been merged with National Institutes with effect from 2020-21. When Committee enquired about the reasons for the same as it would affect the financial autonomy of CRCs, the Department submitted that:-

"Prior to 2020-21, CRCs were funded under Scheme for Implementing of Persons with Disabilities Act (SIPDA). Their funding support was shifted from Scheme to non-Scheme component from the year 2020-21 in consultation with the Finance Division of the Department and they are now funded under budget provisions for National Institutes. The following specific decisions have also been taken in this regard:-

- CRCs will be governed as per the governing structure of respective NIs and Director of respective NIs will be fully accountable for the affairs of CRCs.
- (ii) NI shall monitor physical and financial performance of respective CRCs.
- (iii) There will be consolidation of physical assets, financial and other resources of CRCs and respective NI which will give the benefit of economy of scale in terms of manpower and other resources. Consolidated accounts and annual report of the NI and respective CRCs will be prepared from financial year 2020-21.
- (iv) To enhance the objective of accountability it was also decided that Grants in aid for CRCs will be released through respective NIs. Further, to ensure that there is no parking of funds, NI will be required to further release the funds to respective CRCs within two working days."

2.10 With regard to the current status of infrastructure projects of National Institutes/CRCs in progress, the Department of Empowerment of Persons with Disabilities informed *vide* written reply that the following works are in progress:-

| 1. | SC/ST Building at NIEPMD, Chennai |
|-----|--|
| 2. | Building of NIMHR, Sehore |
| 3. | Hostel Building of CRC, Patna |
| 4. | Construction of office building of CRC, Ahmedabad |
| 5. | Construction of 100 bedded Annexe to Rehabilitation Services Building at SVNIRTAR, Cuttack |
| 6. | Vocational Training Centre for Skill Development Programme" at SVNIRTAR, Cuttack |
| 7. | New Building of CRC, Sundernagar. |
| 8. | New Administrative Building of CRC, Gorakhpur. |
| 9. | Construction of New Vocational Training Centre (TCAB) at NIEPVD, Dehradun |
| 10. | Vertical Extension-Academic Block (Special Education), NIEPVD, Dehradun |
| 11. | Sensory Garden, NIEPVD, Dehradun |
| 12. | Construction of SC/ST Hostel Building (under SC/ST Capital) at AYJNISHD, Mumbai |
| 13. | Construction of permanent building for CRC, Rajandgaon |
| 14. | Construction of permanent building for CRC, Davangere |

2.11 On being asked, why the Department is opening Regional Centres/ Composite Regional Centres in big cities and not in small cities, the Secretary, Department of Empowerment of Persons with Disabilities, submitted that:-

"The point is noted and we will work accordingly".

2.12 The Standing Committee on Social Justice and Empowerment had made certain suggestions based on their observations of the working of the National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD), Chennai during their study visit on 22 January, 2022. The Committee had suggested for the implementation

of mid day meal Scheme, provision of a waiting hall for parents and establishment of a Hydro Therapy Unit at the Institute.

2.13 When asked about the action taken on the suggestions of the Committee, the representative of NIEPMD submitted before the Committee during the course of evidence that:

"......आज के दिन उसकी शुरुआत हो गई है। इस साल से एन आई पी एम डी चेन्नई में मिड-डे -मील की सुविधाएँ लागू हो गई हैं । इसलिए स्टेट के बच्चो को मिड-डे-मील मिलेगा।...दूसरा ऑब्जरवेशन था कि पैरेंट मीटिंग हाल होना चाहिए, जहाँ पेरेंट्स आए और वहाँ बैठ सकें। हम लोगों ने उसे तैयार करा लिया है जिसे सी एस आर फंडिंग के तहत किया गया है।"

2.14 The Department also submitted that construction of Hydro Therapy Unit has been completed and its testing is currently underway.

2.15 The Committee note that 11 Regional Centres of 5 National Institutes have been established across the country to provide specialized services in the field of various disabilities. The Committee also note that 21 Composite Regional Centres have been approved to be set up under various National Institutes as Outreach and Extension Centres. Out of these 13 Composite Rehabilitation Centres have been approved since 2014-15. The Committee are surprised to find that the infrastructure of various Regional Centres and Composite Rehabilitation Centres (CRCs) is not sufficient as many of these Centres are running in rental/temporary buildings and buildings of several CRCs are under construction as well. The Committee have been informed that the cost of establishment and running of the CRC is fully borne by the Department. At the same time, one provision stipulates that CRCs will be established in States/UTs, if required land and temporary accommodation is provided free of cost by the concerned States/UTs. The

Committee feel that such a condition may delay the setting up of CRCs. Hence, it is advised that Department may evolve a mechanism so that the approved CRCs are established in a time bound manner. Since augmentation of infrastructure of CRCs is time consuming, the Department, may, as a temporary measure, utilize the premises of Government-run-Senior Citizen Homes/Bal Vatikas/ CGHS Dispensaries or charitable institutions such as Rotary Club, Helpage India etc. in order to increase the outreach of NIs. The Committee are confident that some, if not all, organizations would respond in a positive manner and be amenable to provide space for such an initiative. It will also be pertinent to mention that the Standing Committee on Social Justice and Empowerment, during their study visit to the National Institute for Empowerment of Persons with Multiple Disabilities(NIEPMD), Chennai, had given certain directions on the facilities provided to beneficiaries of the Institute such as implementation of mid-day meal scheme, construction of waiting hall for parents and setting up of Hydro Therapy Unit at the Institute. The Committee are happy to note that the action has been taken by the Department/Institute on all the observations made by them and hope that the Nis would take feedback from beneficiaries to augment their facilities as per their requirement regularly.

2.16 The Composite Regional Centres (CRCs) have been merged with National Institutes from 2020-2021. The Committee desire to know if the intended objectives behind this measure has been fulfilled. They also desire that the proposals received for opening of Composite Regional Centres from States/UTs should be considered and decided upon at the earliest and in case any issue

arises in approving any proposal, those should be settled in coordination with concerned State Governments/ UTs so that the purpose of establishing CRCs is not defeated.

CHAPTER-III

BUDGETARY ALLOCATION vis-à-vis BENEFICIARIES

3.1 National Institutes are provided Grant-in-Aid under 'Support to National Institute' Head of the Department. The details of Budget Estimates, Revised Estimates and Actual Expenditure pertaining to National Institute from 2017-18 to 2021-22 are as follows:-

(₹ in crore)

| Year | Budget Estimate | Revised Estimate | Actual Expenditure |
|---------|-----------------|------------------|--------------------|
| 2017-18 | 214.74 | 251.38 | 251.39 |
| 2018-19 | 313.02 | 357.97 | 327.19 |
| 2019-20 | 309.95 | 330.50 | 304.79 |
| 2020-21 | 360.00 | 260.75 | 256.81 |
| 2021-22 | 319.00 | 332.50 | 329.50 |
| TOTAL | - | - | 1469.68 |

3.2 The details of Grant-in-Aid released to each National Institute from 2017-18 to 2021-22 are as follows:-

| | | | | | (* | ₹ in crore) |
|--|---------|---------|---------|---------|---------|-------------|
| Name of NIs | 2017-18 | 2018-19 | 2019-20 | 2020-21 | 2021-22 | Total |
| National Institute for the Empowerment of Persons with Visual Disabilities (NIEPVD), | 48.51 | 44.41 | 46.45 | 39.36 | 44.96 | 298.21 |
| Dehradun National Institute for Locomotor Disabilities (NILD), Kolkata | 28.09 | 31.82 | 30.35 | 26.74 | 26 | 197.87 |
| Ali Yavar Jung National Institute for Speech & Hearing | 33.07 | 38.3 | 35.71 | 33.18 | 35.55 | 231.58 |

| Disabilities (AYJNISHD), Mumbai | | | | | | |
|--|--------|--------|--------|--------|--------|--------|
| National Institute for the Empowerment of Persons with Intellectual Disabilities (NIEPID), Secunderabad | 23.85 | 31.57 | 25.45 | 25.95 | 28.62 | 169.11 |
| Swami Vivekanand National Institute for Rehabilitation Training and Research (SVNIRTAR), Cuttack | 32.28 | 37.68 | 33.49 | 32.65 | 39.57 | 238.37 |
| Pt. DeenDayal Upadhayay National Institute for Persons with Physical Disabilities (PDUNIPPD), New Delhi | 26.1 | 29.05 | 26.95 | 20.88 | 27.2 | 165.13 |
| National Institute for the Empowerment of Persons with Disabilities (NIEPMD), Chennai | 30.26 | 43.86 | 34.84 | 27.2 | 33.26 | 218.69 |
| Indian Sign Language Research & Training Centre (ISLRTC), Delhi | 4.5 | 4.85 | 4.2 | 3.88 | 6.95 | 24.38 |
| National Institute of Mental Health Rehabilitation (NIMHR), Sehore | 0 | 0 | 17.25 | 22.72 | 9.88 | 49.85 |
| Total | 226.66 | 261.54 | 254.69 | 232.56 | 251.99 | 1593.2 |

3.3 The details of Grant-in-Aid released to various Composite Regional Centres from 2017-18 to 2021-22 are as follows:-

| | | | | | | · / |
|---|-------------|---------|---------|---------|-------------|---------|
| Name of CRCs | 2017- 18 | 2018-19 | 2019-20 | 2020-21 | 2021- 22 | Total |
| Composite Regional Centre, Guwahati | 255 | 233.75 | 213.4 | 232 | 184 | 1796.06 |
| Composite Regional Centre, Sundernagar | 693.75 | 397 | 396.9 | 190 | 678.52 | 3272.75 |
| Composite Regional Centre, Bhopal | 330 | 205 | 215 | 215.65 | 237.51 | 2066.53 |
| Composite Regional Centre, Srinagar | 165 | 225 | 110 | 275.5 | 751.38 | 3074.33 |
| Composite Regional Centre, Lucknow | 127 | 1140.25 | 397.46 | 175.98 | 259.38 | 2885.28 |
| Composite Regional Centre, Patna | 150 | 524.61 | 841.53 | 58.15 | 278.55 | 3485.17 |
| Composite Regional Centre, Ahmedabad | 107 | 604.02 | 135.58 | 223.77 | 997.25 | 2334.62 |
| Composite Regional Centre, Kozhikode | 214 | 1053 | 645.5 | 297.59 | 419.11 | 3605.29 |
| Composite Regional Centre, Rajnandhangaon | 102 | 134 | 176.15 | 94.2 | 955.47 | 1598.07 |
| Composite Regional Centre, Nellore | 76.45 | 923.29 | 363.14 | 82.31 | 281.06 | 2363.67 |
| Composite Regional Centre, Davengere | 82.5 | 151.5 | 1 85 | 158.67 | 996.39 | 1634.06 |
| Composite Regional Centre, Nagpur | 90 | 163.2 | 841.56 | 29.27 | 72 | 1246.33 |

(₹ in Lakh)

| Composite Regional Centre, Tripura | 80 | 90 | 70 | 41.27 | 70 | 351.27 |
|--|--------|---------|---------|---------|---------|----------|
| Composite Regional Centre, Gorakhpur | 0 | 634 | 184.04 | 56.5 | 1149.84 | 2024.38 |
| Composite Regional Centre, Sikkim | 0 | 0 | 75 | 0.00 | 59.38 | 134.38 |
| Composite Regional Centre, Ranchi | 0 | 36.75 | 42.5 | 143.37 | 126 | 348.62 |
| Composite Regional Centre, Balangir | 0 | 50 | 12.5 | 7.00 | 58.00 | 127.5 |
| Composite Regional Centre, A&N | 0 | 0 | 105 | 76.75 | 62 | 243.75 |
| Composite Regional Centre, Shillong | | | | 22 | 42.82 | 64.82 |
| Composite Regional Centre, Manipur | | | | 44.99 | 73 | 117.99 |
| Total | 2472.7 | 6565.37 | 5010.26 | 2424.97 | 7751.66 | 32774.87 |

3.4 As per the information provided by the Department of Empowerment of Persons with Disabilities, the number of beneficiaries of each National Institutes from 2017-18 to 2021-22 is as under:

(in lakhs)

| SI. No | Name of the Institute Number of beneficiaries | | | es | | | |
|-----------|---|-------------|-------------|-------------|-------------|-------------|-------|
| | | 2017- 18 | 2018- 19 | 2019- 20 | 2020- 21 | 2021- 22 | Total |
| 1 | National Institute for Empowerment of Persons with Visual Disabilities, (NIEPVD), Dehradun | 3.02 | 2.37 | 2.76 | 2.51 | 3.04 | 13.69 |
| 2 | National Institute for Locomotor Disabilities (NILD), Kolkata | 2.25 | 2.85 | 2.77 | 0.78 | 1.25 | 9.90 |

| 3 | Ali Yavar Jung National Institute for the Speech & Hearing Disabilities, (AYJNISHD), Mumbai | 3.54 | 3.26 | 3.92 | 2.22 | 4.30 | 17.24 |
|---|---|-------|-------|-------|-------|-------|-------|
| 4 | National Institute for the Empowerment of Persons with Intellectual Disabilities, (NIEPID), Secunderabad | 3.33 | 3.63 | 3.60 | 2.33 | 3.53 | 16.43 |
| 5 | Swami Vivekanand National Institute for Rehabilitation Training and Research, Cuttack | 3.33 | 3.05 | 3.43 | 1.09 | 1.90 | 12.80 |
| 6 | Pt. Deen Dayal Upadhayay National Institute for Persons with Physical Disabilities (PDUNIPPD), New Delhi | 1.33 | 1.79 | 1.87 | 0.78 | 0.82 | 6.60 |
| 7 | National Institute for the Empowerment of Persons with Disabilities (NIEPMD) Chennai | 2.43 | 2.53 | 2.70 | 1.64 | 3.51 | 12.80 |
| 8 | Indian Sign Language Research & Training Centre (ISLRTC), Delhi | N.A. | 0.01 | 0.04 | 0.47 | 0.56 | 1.08 |
| 9 | National Institute of Mental Health Rehabilitation (NIMHR), Sehore, Madhya Pradesh | N.A. | N.A. | 0.04 | 0.05 | 0.07 | 0.16 |
| | Total | 19.24 | 19.49 | 21.13 | 11.88 | 18.97 | 90.71 |

3.5 Similarly, the number of beneficiaries of Composite Regional Centres (CRC) from 2017-18 to 2021-22 is as follows:-

| | | | | | (In | Lakhs) |
|---|---------|---------|---------|---------|---------|--------|
| Name of CRCs | 2017-18 | 2018-19 | 2019-20 | 2020-21 | 2021-22 | Total |
| Composite Regional Centre, Guwahati | 0.30 | 0.31 | 0.32 | 0.18 | 0.19 | 1.96 |
| Composite Regional Centre, Sundernagar | 0.45 | 0.87 | 0.99 | 0.45 | 0.54 | 3.52 |
| Composite Regional Centre, Bhopal | 0.75 | 0.72 | 0.35 | 0.39 | 0.58 | 3.13 |
| Composite Regional Centre, Srinagar | 0.34 | 0.36 | 0.46 | 0.14 | 0.50 | 2.54 |
| Composite Regional Centre, Lucknow | 0.55 | 0.50 | 0.41 | 0.18 | 1.78 | 4.04 |

| Composite Regional Centre, Patna | 0.14 | 0.12 | 0.11 | 0.11 | 0.31 | 1.25 |
|--|------|------|------|------|------|-------|
| Composite Regional Centre, Ahmedabad | 0.12 | 0.22 | 0.22 | 0.15 | 0.33 | 1.16 |
| Composite Regional Centre, Kozhikode | 0.40 | 0.43 | 0.35 | 0.79 | 0.46 | 3.13 |
| Composite Regional Centre, Rajnandgoan | 0.33 | 0.45 | 0.48 | 0.23 | 0.40 | 2.16 |
| Composite Regional Centre, Nellore | 0.26 | 0.36 | 0.53 | 0.13 | 0.28 | 1.77 |
| Composite Regional Centre, Davengere | 0.06 | 0.13 | 0.16 | 0.09 | 0.20 | 0.64 |
| Composite Regional Centre, Nagpur | 0.52 | 0.38 | 0.36 | 0.36 | 0.89 | 2.54 |
| Composite Regional Centre, Tripura | 0.00 | 0.05 | 0.14 | 0.07 | 0.08 | 0.34 |
| Composite Regional Centre, Gorakhpur | 0.00 | 0.12 | 1.47 | 1.04 | 1.36 | 3.99 |
| Composite Regional Centre, Sikkim | 0.00 | 0.00 | 0.00 | 0.01 | 0.21 | 0.22 |
| Composite Regional Centre, Ranchi | 0.00 | 0.00 | 0.00 | 0.09 | 0.18 | 0.27 |
| Composite Regional Centre, Balangir | 0.00 | 0.00 | 0.00 | 0.06 | 0.13 | 0.19 |
| Composite Regional Centre Andaman & Nicobar. | 0.00 | 0.00 | 0.00 | 0.08 | 0.03 | 0.11 |
| Composite Regional Centre, Imphal | 0.00 | 0.00 | 0.00 | 0.00 | 0.01 | 0.01 |
| Composite Regional Centre, Shillong | 0.00 | 0.00 | 0.00 | 0.00 | 0.08 | 0.08 |
| Total | 4.22 | 5.03 | 6.33 | 4.53 | 8.52 | 33.04 |

3.6 The details of grants-in-aid to National Institutes and beneficiaries from 2014-15 to 2021-22 are as follows:-

| Year | Total GIA released (NIs) (in ₹Crore) | Total beneficiaries (NIs) (in lakhs) | Total GIA released (CRCs) (in ₹Crore) | Total beneficiaries (CRCs) (in lakhs) |
|---------|--|---|---|--|
| 2014-15 | 128.61 | 10.52 | 13.52 | 1.11 |
| 2015-16 | 104.27 | 11.35 | 24.61 | 1.12 |
| 2016-17 | 132.87 | 16.98 | 47.37 | 2.17 |
| 2017-18 | 226.66 | 19.24 | 24.73 | 4.22 |
| 2018-19 | 261.54 | 19.49 | 65.65 | 5.03 |
| 2019-20 | 254.69 | 21.13 | 50.10 | 6.33 |
| 2020-21 | 232.56 | 11.88 | 24.25 | 4.53 |
| 2021-22 | 251.99 (96% increase from 2014-15) | 18.97 (80% increase from 2014-15) | 77.52 (473% increase from 2014-15) | 8.52 (667% increase from 2014-15) |
| Total | 1593.20 | 129.56 | 327.75 | 33.04 |

Dip in GIA released in respect of 2020-21 is due to restriction of release of GIA to 15% in every quarter till 3^{rd} quarter and general cut.

3.7 On being enquired the reasons due to which beneficiaries at some CRCs were less in comparison to other Centres whereas the Grant-in-Aid was higher at such CRCs, the Secretary, Department of Empowerment of Persons with Disabilities submitted before the Committee that:-

"इसका रिव्यू मैंने अपने स्तर पर किया था और उसमें जब हमने पटना का रिव्यू किया तो उनसे यही कहा कि आपके यहां लाभार्थियों की जो संख्या है, उसे इम्प्रूव करने की आवश्यकता है। आपको अपनी आउट-रीच एक्टिविटीज और बढ़ानी चाहिए ताकि लोगों को यह पता चल सके कि आप यहां पर ये सुविधाएं दे रहे हैं, जिससे वहां पर जरूरतमंद लोग आकर उन सेवाओं का लाभ उठा सकें।" 3.8 On being enquired whether the budgetary allocation made for National Institutes is commensurate to the needs of the Institutions especially in view of the fact that cost of assistive devices are increasingly rising and the ambit of recognized disabilities has widened, the Department *inter-alia* submitted in their written reply that:-

"The Budgetary allocation made for National Institutes (NIs) is sufficient for the activities planned as of now. The budgetary allocation for NIs has been gradually increasing over the years to enable them to further enhance their activities."

3.9 On being asked whether grant-in-aid to North-Eastern States is in accordance with the laid down provision that minimum 10 percent of the total grant should be given to North Eastern States, the Committee were informed during the course of evidence by the Secretary, Department of Empowerment of Persons with Disabilities that:-

"This is one area where we are now focussing. नार्थ ईस्ट के लिए हमारी जो ईयरमार्क ग्रांट होती है, we are not able to utilise it because of many reasons including lack of facilities. अगर उदाहरण के लिए अन्य इंस्टीट्यूट्स का देखेंगे तो उनका भी हम थोड़ा सा खर्च नहीं कर पा रहे हैं। इस साल नॉर्थ ईस्ट में सारा पैसा, जो उनके लिए एज पर रूल ईयरमार्क्ड 10 परसेंट है, उसको खर्च करने के लिए हमने दो-तीन चीजें की हैं।"

3.10 With regard to the awareness mechanism adopted by the National Institutes to popularize the facilities provided by the National Institutes, the Committee were informed by the representative of the Department of Empowerment of Persons with Disabilities that:-

"संस्थान के पांच ऑब्जेक्टिव हैं, उसमे एक मेन मुद्दा अवेयरनेस क्रिएशन है। डिसैबिलिटीज से अर्ली इंटरवेंशन अर्ली डाइग्नोसिस के लिए हम राज्य सरकार के साथ कोलेबोरट करते हैं। डिस्ट्रिक्ट लेबल पर डिस्ट्रिक्ट कलक्टर एंड असिस्टेंड डायरेक्टर के साथ कोलेबोरट करके पैम्पलेट्स और पोस्टर बांटते हैं। तेलंगाना की संस्था में सीदीपीओज में टीओटी दी / इसमें सुपरवाइजर, नीचे लैबल पर आंगनवाड़ी वर्कर्स को ट्रेनिंग मिली। राज्य सरकार के साथ मिलकर हम अवेयरनेस प्रोग्राम करते हैं। इसके अलावा हमारे पास १५०० एनजीओज और एसएसए स्कूल्स रजिस्टर्ड हैं। हमारे पास जो भी अवेयरनेस मेटीरियल है, हम सबको देते हैं। गावों या डिस्ट्रिक्ट्स में एनजीओज को हम अपने लेबल पर फ्री पोस्टर्स उपलब्ध करवाते हैं ताकि हर जगह अवेयरनेस क्रिएट करे" 3.11 In this regard, the Secretary, Department of Empowerment of Persons with Disabilities further added that:-

"इसके अलावा वैब साइट्स भी हैं। जो एक्सेस कर सकते हैं"

3.12 The Committee note with dismay the gap in complete utilisation of budgetary allocations. The Department of Empowerment of Persons with Disabilities failed to spend the Grant-in-Aid under "Support to National Institutes" from 2018-19 to 2021-22 in respect of National Institutes and Composite Regional Centres as from the budgetary allocation of ₹1281.72 crore, ₹ 1218.29 crore could be spent. The Committee also note that the Grant-in-Aid released to most of the National Institutes has almost remained static during 2017-18 to 2021-22, rather it has gone down in respect of National Institute for Locomotor Disabilities in 2020-2021 and 2021-2022. The Committee are sad to find that the situation is similar for Composite Regional Centres as expenditure of Composite Regional Centre, Guwahati came down from ₹ 233.75 lakh in 2018-19 to ₹184.00 lakh in 2021-22. The expenditure at Composite Regional Centres at Lucknow, Patna, Kozhikode, Nellore, Nagpur, Sikkim, Sundernagar, Rajnandgaon, Tripura, Gorakhpur and Balangir also came down in 2020-2021. The Committee are unable to comprehend the reasons due to which the grant-in-aid released could not be spent particularly when these Institutions have been vested with the responsibility of development of human resources, render rehabilitation services, conduct research, etc. in the field of disability, which is a vast area to undertake several activities. Not only the Department performed poorly in utilisation of funds, the situation in terms of beneficiaries was also found to be discouraging. The total number of

beneficiaries in 2017-18 were 19.24 lakh which came down to 18.97 lakh in 2021-22 even after establishment of two new Institutes viz., Indian Sign Language Research and Training Centre, Delhi and the National Institute of Mental Health Rehabilitation, Sehore. The Committee are also not impressed with the number of beneficiaries at CRCs as number of beneficiaries has gone down at various Composite Regional Centres. The Committee are of the strong view that had these Institutions/CRCs performed well the allocation of funds would have increased as the cost of assistive devices has been rising and the ambit of disabilities has substantially increased after the enactment of RPwD Act, 2016. Quite clearly, the NIs and CRCs are not performing optimally. Perhaps, the newly established NIs have also not started their proper functioning. Hence, the Committee feel that there is an urgent need to take effective measures to utilize budgetary allocation/ grant-in-aid fully by all the National Institutes / RCs/CRCs so that more and more disabled persons are benefitted by the facilities provided by the Government to them. The Committee would also like the Department to concentrate on North-Eastern States and ensure that Department spend 10% of the total expenditure in North-Eastern States and take suitable measures to establish CRCs in the region including small cities in other parts of the country so that the needs of the Divyangjan are met universally.

CHAPTER-IV

FACULTY/STAFF

4.1 As per the information furnished by the Department for Empowerment of Persons with Disabilities, the current strength of the faculty, members 1 staff at various National Institutes/ Regional Institutes/ Composite Rehabilitation Centres is as follows:-

1. Pt. Deendayal Upadhayay National Institute for persons with physical disabilities

(a) CRC, Lucknow.

There are two Assistant Professors against the sanctioned strength of 5 Assistant Professors. Against the sanctioned strength of 5 lecturers (1 Permanent, 4 outsourced) 4 lecturers currently exist at the Centres.

(b) CRC, Srinagar.

The selection of approved Professional staff/ faculty on contractual basis have been made by the Centre. However, selection of sanctioned vacant regular staff/ faculty is under process as the proposal for the same stand forwarded to the competent authority of the institution for revival of the regular posts.

2. Swami Vivekanand National Institute of Rehabilitation Training and Research

| CRC | | Sanctioned | Vá | acant |
|----------|---------|-------------|---------|-------------|
| | Regular | Contractual | Regular | Contractual |
| Cuttack | 20 | 19 | 12 | 10 |
| Ranchi | 0 | 28 | 0 | 12 |
| Balangir | 0 | 32 | 0 | 12 |
| Imphal | 0 | 27 | 0 | 14 |

Further Staff Inspection Unit, Ministry of Finance, Department of Expenditure submitted report in October, 2016 indicating the details of sanctioned strength, posts abolished and new posts assessed:-

| SL. NO. | GROUP | NO OF POSTS SANCTIONED | NO OF POSTS ABOLISHED | NO OF NEW POSTS CREATED BY SIU | STAFF STRENGTH AFTER SIU ASSESSMENT |
|------------|--|---------------------------|--------------------------|---|--|
| 1 | GROUP A | 36 | 02 | 23 | 58 |
| 2. | GROUP B | 76 | 06 | 33 | 102 |
| 3. | GROUP C (including Group D reclassified as group C) | 170 | 98 | 15 | 87 |
| | Total | 282 | 106 | 71 | 247 |

3. National Institute for Locomotor Disabilities

| Centre | Sanctioned faculty posts | Staff in position | Vacant | Status |
|-----------------|--------------------------------|-------------------|--------|--|
| CRC, Patna | 06 | 01 | 05 | Interview to be held for 04 posts. 1 post re-advertised. |
| CRC, Tripura | 06 | 03 | 03 | Interview to be held for 03 posts. |
| RC, Aizawl | 06 | 02 | 04 | Interview to be held for 02 posts. 2 posts to be re-advertised. |
| CDS, Aizawl | 08 | Nil | 08 | Interview to be held for 06 posts. 2 posts to be re-advertised. |

4. National Institute for the Empowerment of Persons with Visual Disabilities

| | Sanctioned | Filled | Vacant |
|----------------|------------|--------|--------|
| CRC, Gorakhpur | 19 | 17 | 02 |
| CRC, Sikkim | 19 | 08 | 11 |
| CRC, | 19 | 14 | 05 |
| Sundernagar | | | |

All positions are contractual.

5. Ali Yavar Jung National Institute of Speech and Hearing Disabilities

| | Sanctioned | Filled | Vacant |
|--------------|------------|--------|--------|
| Headquarters | 51 | 40 | 11 |
| CRC, Bhopal | 10 | 05 | 05 |
| CRC, | 10 | 04 | 06 |
| Ahmedabad | | | |
| CRC, Nagpur | 11 | 04 | 07 |

6. National Institute for the Empowerment of Persons with Intellectual Disabilities

| | Sanctioned | Filled | Vacant |
|---------------|------------|--------|--------|
| Headquarters | 140 | 81 | 59 |
| CRC, Davangae | 19 | 11 | 8 |
| CRC, Nellore | 19 | 09 | 10 |
| CRC, | 19 | 13 | 6 |
| Rajnandgaon | | | |

7. National Institute of Empowerment of Persons with Multiple Disabilities

| | Sanctioned | Filled | Vacant |
|------------------|------------|--------|--------|
| Headquarter | 19 | 14 | 05 |
| CRC, Andaman | 17 | 11 | 06 |
| & Nicobar Island | | | |
| CRC, Shillong | 19 | 07 | 12 |

8. National Institute of Mental Health Rehabilitation

| | Sanctioned | Filled | Vacant |
|---------|------------|--------|--------|
| Group A | 10 | 04 | 06 |

4.2 When asked about the status of evaluation study of staff strength of National Institutes conducted by Staff Inspection Unit (SIU) of the Ministry of Finance, the Department submitted that:-

"Staff Inspection Unit (SIU) of Department of Expenditure has conducted work measurement study/staff study at the following National Institutes:

| Name of NIs | Conduct of SIU | Date of submission of report | Major recommendations of SIU | |
|--|--------------------------|------------------------------------|------------------------------------|------------------------|
| | | | Posts to be abolished | Posts to be created |
| National Institute for the Empowerment of Persons with Visual Disabilities (NIEPVD), Dehradun | During March, 2015 | 06.05.2016 | 71 | 80 |
| Swami Vivekanand National Institute of Rehabilitation Training and Research (SVNIRTAR), Cuttack | During May- June 2016 | 21.10.2016 | 106 | 84 |

| National Institute for Locomotor Disabilities (NILD), Kolka(a | During 2016 | 16.12.2016 | 56 | 41 |
|--|--------------------------------------|------------|----|----|
| National Institute for the Empowerment of Persons with Intellectual Disabilities (NIEPID), Secunderabad | During August & October 2016 | 20.03.2017 | 24 | 23 |
| Ali Yavar Jung National Institute of Speech and Hearing Disabilities (AYJNISHD), Mumbai | During January - February 2017 | 28.09.2017 | 44 | 25 |

4.3 On being enquired about the steps taken for implementation of the recommendations made by SIU, the Department submitted that:

"(a) Abolition of posts

As per the recommendations of SIU, the concerned Institutes have already started abolishing posts, as indicated below, after the existing incumbent vacated the post on occurrence of retirement/resignation/promotion whichever was earlier:-

| Name of NI | Posts already abolished | Posts not yet abolished as perSIU's recommendations |
|-------------------|----------------------------|---|
| NIEPVD, Dehradun | 61 | 10 |
| SVNIRTAR, Cuttack | 88 | 18 |
| NILD, Kolkata | 40 | 16 |
| NIEPID, | 18 | 6 |
| Secunderabad | | |
| AYJNISHD, Mumbai | 35 | 9 |

(b) Creation of posts

The proposal of creation of posts as per SIU's recommendations in respect of 05 Institutes was referred to Department of Expenditure on more than one occasions, from the year 2017 to year 2020, however the same was not approved." 4.4 On being enquired the reasons due to which training faculty and non-teaching staff is not sufficiently available at all the Institutes/ CRC's, the Committee were informed by the Secretary, DEPwD during the deliberation that:-

"Human resource is deficient. We are evolving courses. We are trying to publicise them to the extent possible so that the students can come. But, in my humble opinion, every course has a relationship with the employability. We do need them in Institutes but we need quality manpower and we need the institutes also to roll out those courses. So, all these things, put together, is at present resulting in deficient human resource availability. We are working towards it to bridge that gap".

4.5 The Committee are disappointed to note that the faculty members in most of the Institutes are much less in comparison to their sanctioned strength. Insufficient faculty even in those Institutes which were established decades back is an alarming revelation. The situation at CRCs is also not good. To give an instance, the sanctioned strength for all the CRCs of National Institute for Locomotar Disabilities is 26, out of which 20 posts are vacant. Similarly, out of the sanctioned strength of regular posts of 20 and contractual posts of 106 at CRCs of Swami Vivekanand National Institute of Rehabilitation Training and Research, 8 regular posts and 58 contractual posts are vacant. Since the situation at other Institutes/CRCs is equally bad, the Committee would suggest that the Department needs to thoroughly examine the reasons, address the same early and get the vacancies filled so that the students and beneficiaries do not suffer. It must also be ensured that recruitment is done in a fixed time frame in future and is not left to linger for years together. The Committee have further observed that the information with regard to the sanctioned/actual strength is not available in the Annual Report of the Institutes, and are of the strong opinion that such

information should be made available in Annual Reports of the Institutes. In this context, the Committee notice that an assessment study of teaching/non teaching staff of 5 National Institutes was conducted by Staff Inspection Unit, Ministry of Finance, Department of Expenditure way back in 2016 which had recommended for creation of some new posts and abolition of a number of posts in these Institutes. The Committee are surprised that while several posts were abolished on the basis of recommendations of SIU, the proposal for creation of new posts was not approved. The Committee reiterate that for the smooth functioning of the Institutes, it is imperative that number of staff and faculty should be in consonance with the actual requirement so that the functioning of these Institutes is not hampered due to shortage of staff. The Committee, therefore, desire that the Department should once again pursue the matter of creation of posts in these Institutes with the Ministry of Finance because the establishment of the Institutes has no meaning if those are not able to perform/function due to lack of requisite personnel.

CHAPTER-V

TRAINING COURSES AND RESEARCH PROJECTS

5.1 As per the mandate of the National Institutes, all the Institutes including Composite Regional Centres conduct various courses to train in various fields for the rehabilitation of disabled persons. One of the objectives of the National Institute is to conduct research in the field of various disabilities. The Committee have been informed by the Department of Empowerment of Persons with Disabilities that following courses are conducted and following research projects were/ are being undertaken at these Institutes.

A. Pt. Deendayal Upadhayay National Institutes for persons with Physical Disabilities

Courses

- 1. Bachelor Degree in Physiotherapy
- 2. Bachelor degree in Occupational therapy
- 3. Bachelor degree in Prosthetics and Orthotics
- 4. Master degree in Prosthetics and Orthotics.

The Committee have, however found that out of intake capacity of 162 various mentioned courses actual intake was 156 in 2019-20. Similarly, intake in 2020-21 and 2021-22 was 174 in each year against capacity of 185. The intake was not equal to the capacity at Composite Regional Centres at Lucknow and Srinagar also. In Composite Regional Centres, Lucknow against the intake capacity of 180 during 2019-20, 2020-21 and 2021-22 actual intake was 152 students. Similarly, Composite Regional Centre Srinagar the actual intake was 204 against the capacity of 230 during 2019-20, 2020-21 and 2021-22.

Research Projects

On the scrutiny of the information furnished by the Department of Empowerment of Persons with Disabilities with regard to the functioning of the Institutes, it is found that the following research projects have been undertaken by the Institute:-

| Year | Research |
|---------|--|
| 2004 | Research on "Health Education Programme on coping with Different Ability". |
| 2013-14 | (i) Research on "Effectiveness of Mirror Therapy on motor recovery of upper extremity in chronic stroke patients."(ii) Research on "Role of Less affected upper extremity in post stroke rehabilitation". |
| 2014-15 | (i) Research on "Effect of Activity Based Mirror Therapy on Lower Limb Motor Recovery in Stroke" (ii) Research on "Association of Anthropometric characteristic to foot type and static postural balance strategy in young adults." |
| 2016 | Research on "Opinions and Expectations from Self and Family of Adolescent Girls with Locomotor Disability." |
| 2018-19 | (i) Research on "Identifying and modulating establishment of laterality in children with Developmental Disabilities." (ii) Research on "Building sensorimotor framework for plan engagement for sensorimotor and socio-emotional in children with Developmental and multiple disabilities." |
| 2019-20 | Research on "Neural plasticity based Sensory- Rehabilitation Protocol in Post Stroke Hemiparesis." |

B. Swami Vivekanand National Institute of Rehabilitation and Research

Courses

The Composite Regional Centres, Guwahati conducts three courses. During the year 2019-20 and 2020-21, the actual intake of students was 96 against the approved intake of 170 for all the three courses. Whereas, in 2021-22, two courses appeared to discontinue and in one course the actual intake was 15 against approved intake of 30.

Research Projects

"(i) (a) Development of B.K. Modular Prosthesis and Technology transferred to ALIMCO for mass production followed by Mass dedication to the Nation

by the then His Excellency President Dr. A.P.J. Abdul Kalam and the same component are being used in entire the Country.

- (b) Development of Four Bar Linkage A.K. Modular Prosthesis with Transfer of Technology to ALIMCO for Mass Production followed by the component adopted in entire Indian context.
- (c) Development of Surface Response Kinetic Foot and the same being awarded as Based Scientific Innovation by OPAI.
- (d) SVNIRTAR generates manpower in the field of rehabilitation of Locomotor Disabilities by conducting Bachelor and Master Degree Courses in Physiotherapy, Occupational Therapy and Prosthetics and Orthotics and also DNB, PMR. It also provides medical, surgical and assistive devices for the rehabilitation of Persons with Disabilities.

(ii) The Department of Occupational Therapy has developed following splints:-

- Functional forearm stabilizer splint for C5 tetraplegic
- Graded supinator splint
- Shoulder positioning splint for subluxation of shoulder.
- Graded static elbow conformer orthosis for treatment of Elbow flexion contracture in motor neuron disease.
- Adjustable VIC splint for the treatment of VIC.
- Graded supinator splint for cerebral palsy children with pronator tightness
- Assistive feeder for brachial plexus injury.
- Orthotic device to enhance tenodesis functional of hand in tetraplegics.
- Modular positioning system for obstetric brachial plexus injury.

(iii) Department of Physiotherapy has the following Innovation Research works at their audit:-

- Incidence of Upper Thoracic dysfunction in low back pain with or without radiation to lower limb.
- Effects of Levator Scapulae release in the management of prolaesed inter vertibral dise- an innovative technique.
- Effects of modified bicycle (outdoor) in the rehabilitation of Children with Cerebral Palsy.
- Effect of Pirifornis and hip flexors stretching in the management of coccygodynia an innovative technique.

(iv) Physical Medicine and Rehabilitation Department has done the following Innovation Research works:-

• Effectiveness of USG guided Prolotherapy on structural and functional outcomes in supraspinatus injury.

- Surface Neuro-modulation on Posterior Tibial Nerve and parasacral stimulation for Neurogenic bladder.
- Limb Deformity correction by Hexapod Fixator- An innovative approach
- UMEX fixator method in neglected CTEV in the age group of 2 to 8 years.
- Effectiveness of Dynamic over static foot abduction brace and evaluation of impact of parental socio-educational status in the maintenance plane of clubfoot correction
- Effectiveness of Single Injection of PRP over Corticosteroid in the Treatment of Plantar Fasciitis"

C. National Institute for Locomotor Disabilities

Courses

As per the information received from the Department the actual intake was 166 students against the intake capacity of 285 during the years 2019-20, 2020-21 and 2021-22.

Research Projects

Various Research projects were conducted in collaboration with Indian Space Research Organization (ISRO), Department of Science and Technology (DST), Indian Institute of Technology (IIT), Kharagpur, Indian Institute of Engineering, Science and Technology (IIEST), Shibpur, Jadavpur University, College of Science and Technology, University of Calcutta and other premier institutes.

Completed projects:

- Electronic Hand Disability Scorer Machine (e-HDSM) The prototype of the testing device developed and tried on 33 PwDs.
- To design a system for testing & training the residual muscles of an upper limb amputee – a prototype of the myo-trainer developed and tried on 13 Amputees till date.

Patent done after completion of research projects:

A lower limb exoskeleton with active Hip, Knee, Ankle Joint for load augmentation and mobility regeneration for persons with mobility disorder and for military purposes and process for controlling the same.

- Electronic walk way for Non-Impaired and Locomotor Disabled (EWALKNILD).
- Low cost Electronic Orthopaedic Insole for Gait Analysis based on force sensitive capacitative sensor.

Ongoing Major Research Projects (In collaboration with ISRO, Trivandrum):

- Design and development of ISRO smart limb an approach with microprocessor intelligent knee joint.
- Development of composite dynamic multi axial prosthetic foot.

D. National Institute for the Empowerment of persons with Visual Disabilities

Courses

The Department information reveals that at Composite Regional Centres, Sundarnagar and Composite Regional Centres, Gorakhpur, four courses and 2 courses are organised respectively. At Composite Regional Centres, Sundarnagar out of approved intake of 420 only 118 students were admitted during 2019-20, 2020-21 and 2021-22. The actual intake was 24 against the approved intake of 60 during 2021-22 at CRC Gorakhpur. The Composite Regional Centre, Sikkim is yet to start.

Research Projects

The Details of R&D projects during last 5 years of the Institute are as follows:

| Year | No. of Projects undertaken | Completed | On-going |
|---------|-------------------------------|-----------|----------|
| 2017-18 | 07 | - | 07 |
| 2018-19 | 26 | 07 | 19 |
| 2019-20 | 20 | 14 | 06 |
| 2020-21 | 07 | 03 | 04 |
| 2021-22 | 04 | 02 | 02 |
| 2022-23 | 04 | - | 04 |

E. Ali Yavar Jung National Institute of Speech and Hearing disabilities

Courses

As informed by the Department, Composite Regional Centre, Bhopal conducts three courses and Composite Regional Centre, Ahmedabad conducts one course, whereas Composite Regional Centre, Nagpur, do not organize day long term courses. At Composite Regional Centre, Bhopal against the approved intake of 225 in 2019-20, 2020-21 and 2021-22, the actual enrolment was 140, whereas against the intake capacity of 85, the actual intake was 71 at CRC, Ahmedabad in 2019-2023.

Research Project

(a) Research projects awarded National and other Awards are:-

- Barrier free Town Panchayat, Badlapur, Maharashtra
- Development of CROS HEARING AIDS for persons with unilateral hearing loss.
- User friendly website for the persons with hearing impairment for jobs
- Online hearing assessment by e-checking.
- Development of solar battery charger for charging pencil cells used for pocket model hearing aids issued under ADIP scheme.

(b)The ongoing Research Projects for the year 2021-22 and 2022-23 are:-

- Development of module on early listening and communication skills for children with cochlear implant under ADIP Scheme
- Adaptation of Apraxia, battery for Adults in Hindi and Telugu
- Development of a module for Parent empowerment for rehabilitation of children with hearing impairment.
- Development of Curricular Framework for Cross Disability Early Intervention and School Readiness.
- Profiling of Passed out students of AYJNISHD (D).
- Development of Accessible e-content on Basic Concepts in Environmental Science using Multi Modal Communication Approach.

F. National Institute for the Empowerment of Persons with Intellectual Disabilities

Courses

As per the information of the Department, two courses are organized at Composite Regional Centre, Devnagere, and one course is organized by Composite Regional Centre, Rajnandgaon and one course at Composite Regional Centre, Nellore. *The* actual intake at these courses during 2019-20, 2020-21 and 2021-22 was 124 against the intake capacity of 330 students.

Research Projects

The Institute has so far completed 74 research projects in collaboration with various national and international agencies such as US-India Rupee Fund, UNICEF, UNDP, ICSSR and S&T Mission Mode, and the Projects funded by the Institute.

Proposals of new projects for which funds are yet to be received:

- A study on association between visual-motor perception and cognitive abilities of children with Specific learning disabilities.
- Development of Academic Achievement Test for Specific Learning Disabilities (SLD) A tool for educator.
- Exact causes/reasons for high number of Divyangjan having Intellectual and Development infirmities in the State of Uttar Pradesh, Telangana, Bihar and West Bengal.

G. National Institute for Empowerment with Multiple Disabilities

Courses

The Composite Regional Centre, Kozhikode conducts three long term HRD courses and certificate course in care giving. However, the information in regard to actual intake against approved intake is incomplete.

Research Projects

Seven Books have been published on various Subjects such as Deaf Blindness and its management, stress management and capacity building, etc. and works on 50 projects is ongoing.

H. Indian Sign Language Research the Training Centre

Courses

94 students were enrolled out of intake capacity of 150 in their two courses during the year 2019-20, 2020-21 and 2021-22.

I. National Institute of Mental health Rehabilitation

During the year 2020-21 and 2021-22, the actual intake was 132 against the capacity of 180 students in the following three courses.

- a) Certificate Course in Care Giving Mental Health (CCCG)
- b) Diploma in vocational rehabilitation Intellectual disability (DVR-ID)
- c) Diploma In Community Based Rehabilitation (DCBR)

5.2 On being asked to elaborate the process for conducting courses by the Institutes, the Secretary, Department of Empowerment of Persons with Disabilities informed the Committee during the deliberation that:-

"हमारे नैशनल इंस्टीट्यूट्स पीएचडी प्रोग्राम्स भी चलाते हैं। डिप्लोमा इन नेशनल बोर्ड इन्क्लूडिंग पोस्ट डिप्लोमा दो तरह से कोर्सेज हैं, जो हमारे इंस्टीटूट्स में चलते हैं इसमें एमफिल, पोस्ट ग्रेजुएट, अंडर ग्रेजुएट के कोर्सेज, डिप्लोमा ऑफ़ सर्टिफिकेट्स हैं. इसमें सर्टिफिकेट कोर्सेज नेशनल इंस्टीट्यूट्स अपने लेवेल पर चलातेहैं। हालांकि इसमें कोर्स वगैरह की मंजूरी रिहैबिलिटेशन काउंसिल ऑफ़ इंडिया के द्वारा दी जाती है और डिप्लोमा के कोर्सेज आर सी आई की तरफ से चलाए जाते हैं। वे निर्णय करते हैं कि कितनी सीटें कहां पर होंगी और सारा कोर्स उनकी तरफ से बताया जाता है। अंडर ग्रेजुएट, पोस्ट ग्रेजुएट में जहां-जहां पर हमारे संस्थान स्थित हैं, वहां पर जो यूनिवर्सिटीज हैं, उनके साथ मिलकर ये प्रोग्राम चलाये जाते जो डिग्री होती है, वह यूनिवर्सिटी से मिलती है।" 5.3 When asked about the steps taken by the Institutes during COVID-19 pandemic, the Secretary, submitted before the Committee during the meeting that:-

"कोविड के समय भी जब बाकी जगह थोड़ी लॉकडाउन की स्थिति थी, तब भी हमारे संस्थान लोगों को सेवाएं प्रदान करते रहे। आगे चलकर हम अपने प्रेजेंटेशन में भी दिखाएंगे कि हमने कितने लोगों को सेवाएं प्रदान कीं और हमने इसमें टेक्नोलॉजी का भी भरपूर उपयोग किया है। हमारे पास तीन तरह की कैटेगरी के पेशेंट्स आते हैं। फर्स्ट रेफरल, जिसमें हम पहली बार उनको चेक करते हैं, उसके बाद उसका फॉलो-अप ऐक्शन होता है। उसके बाद बीच में जब कोविड आ गया तो हमने उनको टेली- मेडिसिन के द्वारा भी टेक्नोलॉजी के तहत उनके प्रश्नों को हैंडल करने की कोशिश की और उनको पूरी सेवाएं प्रदान करने की कोशिश की। मैडम, हम इस बात को विशेष तौर पर जरूर बताना चाहते हैं कि पूरे कोविड के दौरान हमारे नैशनल संस्थानों में जो भी सुविधाएं दिव्यांगजनों के लिए हैं, वे सभी कार्य करती रहीं।"

5.4 On being enquired about the viability of courses taught at the Institute, the Secretary, DEPwD informed the Committee during the deliberation that:-

"We are trying to evolve courses which will be more popular with the people to opt for. That is why we have tasked RCI to come out with courses which are more popular and which have better employability. That is a reason we changed the syllabus. We tried to merge a few things there to make it more attractive. What we have realised is this. Earlier, we were developing courses based on a single disability, whereas now the cases are of multiple disability. So, the person who is getting trained say in 'X' disability, he should have some knowledge of 'Y' disability also so that if a patient comes from that category, he can handle that patient. So, that is one way of, we can say, improvising the syllabus and making it more inclusive."

5.5 On being enquired about the progress made by the National Institutes in the field of Research in various disabilities, the Secretary, Department of Empowerment of Persons with Disabilities informed the Committee during the course of evidence that:-

"रिसर्च की रिस्पॉन्सिबिलिटी भी नैशनल इन्स्ट्रियूट्स की है। जो नैशनल इन्स्ट्रियूट जिस डिसेबिलिटी को फोकस करके बनाया गया है, उस पर रिसर्च करना भी उस नैशनल इन्स्ट्रियूट का काम है।" 5.6 The Committee are dismayed to note that the National Institutes including Composite Regional Centres mandated to conduct courses to train in various fields for the rehabilitation of disabled persons are not able to get the requisite number of candidates for the same. This holds true in almost all the Institutes/ Composite Regional Centres. It is a cause of great concern particularly for courses run in the Institutes, which came into existence long time back. Besides such courses need specialized softwares and equipments with considerable cost, which must be utilized fully. The Committee have been informed about a recent initiative, wherein the Department has requested the Rehabilitation Council of India to evolve courses, which are popular and are more inclusive so that the cases of multiple disabilities are taken care of. The Committee feel that such corrective measures should have been taken earlier. Lack of candidates for courses has a direct impact on availability of good trainers for the rehabilitation of Divyangjan. The Committee therefore, desire that the Department should vigorously pursue with the Rehabilitation Council of India and take advice from experts as well to urgently design courses, which are attractive to potential students and meet the current requirement of trainers/counsellors for divyangian. The Committee also recommend that the Department should direct all the Institutes to take suitable measures to publicize the courses well so that no seats in the courses are left vacant in future.

5.7 The Committee note that one of the objectives of the National Institutes is to conduct research in various types of disabilities. Several major researches have been conducted by various National Institutes in the field of assistive

devices, rehabilitation and other crucial aspects related to various disabilities. However, the Committee are unhappy to find that three Research projects at National Institute for the Empowerment of Persons with Intellectual Disabilities are yet to start as funds are not received. The Committee are of the strong opinion that the field of research in the disability sector is lacking behind and hence due care has to be taken so that more research projects are undertaken for indigenous development of technology, which would make the lives of Divyangjan comfortable and self-reliant. The Committee would therefore like the Department to focus more on the research activities of the Institutes and allocate adequate dedicated funds for this purpose so that research does not suffer for want of funds.

5.8 The Committee, during the course of their deliberation with an NGO working for welfare of Leprosy Cured Persons (LPCs), have found that Leprosy cured but deformed persons also constitute a category of disabled persons. But unlike others the nature and extent of deformity in such persons cannot be fixed since Leprosy is a progressive disease. The Committee feel that the expertise and wide outreach of National Institutes can be effectively utilized to provide services, treatment and rehabilitation of LPCs. The National Institute for Locomotor Disabilities and Swami Vivakanand National Institute of Rehabilitation of persons with Locomotor disabilities and their funds can be effectively utilized to provide the customized aids and appliances required by such LPCs, who otherwise lead a miserable life with extreme poverty and social stigma. Further,

research for betterment of quality of life of LPCs can also be undertaken by these Institutes. The Committee desire to be apprised of the Department's plan of action on their particular matter.

CHAPTER-VI

MENTAL HEALTH

6.1 According to India's National Commission Macro economic and health Report, 2005, the prevalence of serious mental illness in Indian population is nearly 6.5% which roughly amounts to 71 million people (78 million people in 2011). By the year 2020, the burden of neuropsychiatric disorders was expected to rise from the current load to 10.5%. In this regard, National Institute for the Empowerment of Persons with Intellectual disabilities was established in the 1984 at Secunderabad to build capacities for Empowerment of Persons with Intellectual Disability. Another Institute, National Institute of Mental Health rehabilitation was established in 2019 at Sehore, Madhya Pradesh to promote the rehabilitation of mentally ill persons using an integrated multi disciplinary approach.

6.2 On being enquired by the Committee about the achievements of the Institute, the Committee were informed by the Department in their written reply with regard to National Institute for the Empowerment of Persons with Intellectual Disabilities, Secunderabad that:-

(i) "The Institute has developed Teaching Learning Material Kits for the benefit of Children with Intellectual disabilities in the year 2014. So far, NIEPID has distributed 37,245 teaching learning materials throughout the country during the last 7 years. The Institute has prepared videos in 14 languages on usage of TLM kits and uploaded on NIEPID youtube channel for information of the beneficiaries.

(ii) The Institute in collaboration with various International agencies has conducted 5 International Conferences/Seminars and 11 National Conferences/Workshops during the past 8 years.

(iii) During last 8 years, a total of 2527 Short Term Training Programs including webinars and Programs for SSA teachers were conducted. A total of 160046 professionals were trained from these programs.

(iv) As part of Research & Development Programmes, the Institute completed a total of 11 research projects since 2014. At present 4 Research & Development programs are on-going and proposal for 3 new projects was submitted.

(v) Since 2014, as a part of North East activities, NIEPID has conducted 446 awareness camps, training programmes, etc in 8 North East States and a total of 47,100 persons benefitted from the above programs. As a part of North East activities, CAI Labs/Model Class rooms are set up in 39 different schools in 7 North East States from 2015-16 to 2019.20. An amount ₹1,60,39,889/- spent for setting up of CIA Labs/Model Class rooms."

6.3 With regard to the services provided/achievements of National Institute of Mental health Rehabilitation, Sehore, the Committee were informed *vide* written reply by the Department of Empowerment of Persons with Disabilities that:-

(i) Services to more than fifteen thousand beneficiaries have been extended in last three years,

(ii) Conception and Coordination of Mental Health Rehabilitation Helpline- Kiran at National Level.

(iii) Starting of Clinical Psychology OPD.

(iv) Starting of the first RCI registered Certificate Course for Caregivers (CCCG) in the field of Mental Illness.

(v) Starting of the Diploma Level Courses i.e. Diploma in Vocational Rehabilitation (DVR- ID), Diploma in Community Based Rehabilitation (DCBR).

(vi) Online programs on the issues related to Mental Health and Mental Illness at National Level along with the awareness generation at grass root level."

6.4 Since cases of Autism Spectrum Disorder(ASD), a type of intellectual disability has been badly spreading/increasing in the Country, the Committee enquired about the initiatives being taken by the Department in this regard, the Committee were informed by the representative of the National Institute of Empowerment of Intellectual Disabilities that:-

"Earlier, in the RPWD Act, autism was not a disability. It was ID. ऑटिज़म पहले इंटेलेक्चुअल डिसएबिलिटी का एक एसोसिएटेड कंडीशन माना जाता था, लेकिन इसका असेसमेंट पूरी तरह से किया जाता है।

6.5 On being enquired about the tool for assessment of Autism being developed in India, the representative of the National Institute of Empowerment of Intellectual Disabilities stated during the evidence before the Committee that:-

"सर, यह इंडियन टूल फॉर असेसमेंट ऑफ ऑटिज़म है। हमारे यहाँ पर अभी ऑटिजम फुलस्केल पर प्रिवेंशन के लिए है। Because autism is a genetic disorder. प्रिवेंशन के लिए हम लोग प्रयास कर रहे हैं। हमारा जो अर्ली इन्टर्वेंशन सेंटर्स हैं, उसमें जो क्रॉस डिसएबिलिटी अर्ली इन्टर्वेंशन सेंटर है, वहाँ पर हरेक डिसएबिलिटी का अर्ली इन्टर्वेंशन होता है।"

6.6 When asked about the status of construction of National Institute of Mental Health Rehabilitation, Sehore as it is running from the temporary accommodation, the Secretary DEPwD informed the Committee during the course of evidence that:-

"कोविड के आने से और बारिश के ज्यादा होने से कुछ चैलेंजेज़ हैं, तब भी हम कोशिश कर रहे हैं कि हमारा जो संस्थान है, इसकी बिल्डिंग का काम अगले साल जून तक खत्म हो जाए। इसका काम बहुत जोर-शोर से चल रहा है और साथ ही साथ इसकी रेगुलर मॉनीटरिंग भी यहां से की जा रही है।"

6.7 When asked about the services provided to the beneficiaries in the Institute, the representative of the Institute submitted before the Committee:-

"हम वहां पर जो सर्विसेस दे रहे हैं, उनमें psychological assessment like IQ testing, neuropsychological assessment, etc., personality assessment, psychological intervention for all, psychotherapy for different mental health issues like depression, anxiety, online therapeutic and counselling services, etc."

6.8 The Committee acknowledge the efforts of the Department in tackling the issues relating to mental health as two National Institutes *viz* National Institute for

the Empowerment of Persons with Intellectual Disabilities at Secunderabad and National Institute of Mental Health Rehabilitation at Sehore were established in 1984 and in 2019 respectively to address the Mental Health issues. The Committee find that the National Institute for the Empowerment of Persons with Disabilities set up to build capacities for empowerment of persons with intellectual disabilities have taken several initiatives such as development of Teaching learning material kits, conducted conferences/ training programmes, research etc. However, the progress made by the Institute is perhaps not keeping pace with the number of persons suffering from intellectual disabilities. The Committee feel that the National Institute for the Empowerment of Persons with Intellectual Disabilities could have done much more and developed expertise in the field as it came into existence way back in 1984. The Committee, therefore, desire that the Institute should gear up their research activities to tackle the growing cases of intellectual disability in the country. They also desire that the Institute should increase the number of workshops organized by them across the country so that adequate awareness about the intellectual disabilities/mental illness would be generated in the society.

6.9 The Committee are not satisfied with the progress of construction work of the building of National Institute of Mental Health Rehabilitation established at Sehore. The Institute established in 2019 is yet to be shifted in their own building, which, the Committee cannot but attribute to lack of serious efforts on the part of the executing agency. They are unable to understand as to how the entrusted responsibility will be shouldered by the Institute if it does not have its own

campus with requisite infrastructure. Hence, the Committee recommend that the work must be completed in a time bound manner so that the Institute is fully able to undertake the responsibility entrusted to it. The Committee would also like to recommend that instead of employing faculty members on contractual basis, it should be ensured that the required faculty is recruited permanently so that the Institute is able to give quality and continuous service to the needy persons.

The Committee note that the cases of autism in children have been found 6.10 to be widely prevalent in the Country. However, not much progress has been made to deal with such a complex disability. The Committee are happy as they have been informed that autism is now being considered a disability which was not the case prior to enactment of RPwD Act, 2016 and that a tool to assess autism has also been developed in India. The Committee further note that with the help of National Institute for the Empowerment of persons with Intellectual disabilities and National Institute of Mental Health Rehabilitation, the problems associated with autism will be taken care of. At the same time, the Committee also hope that necessary action will be taken including research by the Institutes for early detection of symptoms of autism in children so that treatment can start at the initial stage itself. As such children may have below or above average IQ level, the Committee feel that self help skills, communication skills, occupational therapy, speech therapy, counselling facility for family members and vocational training will be quite useful for development of such children. The Committee therefore feel that these two Institutions can play a major role to assess the needs of such children and also take necessary measures to provide counselling

and proper guidance to their parents so that they can understand specific requirement of their child.

CHAPTER-VII

MONITORING OF THE NATIONAL INSTIUTES

7.1. The National Institutes are autonomous bodies registered under Societies Registration Act, 1860. They have a two-tier Governing Structure. First, the Governing/General Council (GC), which in respect of all NIs, is headed by the Secretary, DEPwD except National Institute of Mental Health Rehabilitation (NIMHR), Sehore is chaired by an academician. Secondly, there is called the Executive Council (EC) wherein General Council which is chaired by the Joint Secretary, DEPwD dealing with NIs. In case of NIMHR, EC is chaired by Director, NIMHR.

7.2 The National Institutes are headed by a Director, (Director level officer in the Government of India) except NIMHR/ ISLRTC where a Joint Secretary level Officer is appointed as the Director. PwDs or Organizations related to PwDs are represented in the GC/EC on honorary basis. The Governing Structure of National Institutes and their Regional & Composite Regional Centres (CRCs) was revamped in April, 2020 with the objective of further improving and strengthening their efficiency and accountability.

7.3 On being enquired about the effectiveness of the governing structure in the management of these Institutes, the Secretary, submitted during the deliberation of the Committee that:-

"जितने भी नेशनल इंस्टीट्यूट्स हमारे विभाग के हैं, उनको कैसे हम चलाते हैं, क्योंकि उनकी आटोनोमी भी है और साथ में उनका एक गवर्निंग स्ट्रक्चर भी बनाया गया है, ताकि वह जो काम कर रहे हैं, उनकी हम प्रोपर मोनिटरिंग भी कर सकें और उन्हें यदि हमें लगता है कि उन्होंने कुछ कम किया है, तो हम उस पर फोकस कर सकें।"

7.4 She also added with reference to the role of the Department in monitoring of the National Instutions that:-

"उसमें जो एग्जिक्युटिव कमेटी की मीटिंग है, वह रेगुलर जॉइंट सेक्रेटरी के लेवल पर होती है। उसमें जो-जो निर्णय है, जो आगे काम करने हैं, वह उसमें सारे के सारे रखे जाते हैं। उसके ऊपर हम कह सकते हैं कि हमारे पूरे दिशा-निर्देश हैं और ओवर साइट भी होते हैं कि जो पहले निर्णय लिए गए, उनके बारे में उन्होंने आगे क्या काम किया है।" 7.5 On being enquired about the measures taken to ensure that the quality is maintained with regard to the facilities available at the Institutes and the instruments/ devices provided to the disabled persons, the Secretary submitted during the course of evidence that:-

"इस सिलसिले में हमारे जो एड एंड असिस्टिव डिवाइसेज़ होते हैं, जो कैम्प के द्वारा हम लाभार्थियों को देते हैं, उसकी क्वालिटी चैक के बारे में हमने पिछले चार-पाँच महीने में इसके ऊपर काफी मंथन किया है कि इसको हम कैसे एन्श्योर करें कि हम जिनको दे रहे हैं, वह उस सर्विस से सटिस्फाइड हो और उनको हम अच्छी क्वालिटी का दें। उसमें हमने दो-तीन चीजें की हैं। इसमें एक हमने फीडबैक फॉर्म रखा है कि आपको जो चीज मिली है और जो आपको इक्विपमेंट दिया गया है, आप उस सर्विस से सटिस्फाइड हैं। चाहे वह मोटर ट्राइसाइकिल हो या कोई और एड एंड इक्विपमेंट हो। अगर उसमें आपको किसी चीज की खराबी लगती है, हम जो एलिम्को के थ्रू देते हैं, उसकी एक साल की वारंटी होती है। लेकिन हम यह नहीं चाहते कि वह हमारे पास आए और कहे कि हमारी चीज खराब हो गई है। इसका मतलब है कि उसके अंद रगुणवत्ता नहीं है।

हमने दो चीजें एन्श्योर की हैं कि एक तो आपकी कालिटी अच्छी होनी चाहिए। दूसरा, आपने जिस लाभार्थी को दिया है, वह सटिस्फाइड रहे। जहां तक एनजीओज़ की बात हैं, कुछ एनजीओज़ अपने लेवल पर भी सीएसआर फंड कहीं से इकट्ठा करके बांट सकते हैं, उसके ऊपर हमारा इतना ओवर साइट नहीं है। उसके लिए हम डेफिनेटली कोई मैकेनिज्म डेवलप करेंगे ताकि वहां पर भी हम एन्श्योर कर सके कि उसकी गुणवत्ता एन्श्योर हो सके। अल्टीमेटली लाभार्थी को परेशानी नहीं होनी चाहिए, चाहे वह एनजीओ दे, चाहे वह सरकार दे, चाहे वह सीएसआर फंड से दे, चाहे वह सरकारी फंड से दे। उसके बारे में हम अपनी तरफ से पूरी कोशि शकरेंगे।"

7.6 She further elaborated on the initiatives taken by the Department with regard to monitoring of the National Institutes that:-

"हम लोग एक पोर्टल डेवलप कर रहे हैं, जो दो महीने में लाँच हो जाएगा कि कौन से लाभार्थी को कौन सा इक्विपमेंट दिया गया है और उसको कोई शिकायत है तो वह उसके ऊपर अपनी शिकायत भी दर्ज करवा सकता है। साथ ही साथ जहां पर हमारे इक्विपमेंट बनते हैं, जैसे एलिम्को है, जो कि हमारे लिए मेन इक्विपमेंट बनाती है, उसके ऊपर भी हम पूरी निगरानी रख रहे हैं। साथ ही साथ उनको एम्फेसाइज भी कर रहे हैं कि आपके इक्विपमेंट में खराबी नहीं आनी चाहिए। यह कोई कारण नहीं है कि आप एक साल के बाद अगर वारंटी पीरियड में है, तो उसको रिप्लेस कर सकते हैं, ऐसा होना ही नहीं चाहिए। दूसरा यह है कि आपके सर्विस सेंटर्स लाभार्थी के घर के नजदीक होने चाहिए। मान लीजिए, कोई छोटी-मोटी खराबी किसी इक्विपमेंट में आ जाती है तो वह उस इक्विपमेंट को डिस्कार्ड करके न रखे। वह यह जाने कि उसको कहां से ठीक करवाकर उसका फिर सेइस्तेमाल किया जास के।" 7.7 The Committee found from the written reply furnished by the Department that no evaluation study on the functioning of the Institute has been conducted of Pandit Deendayal Upadhayay National Institute for Persons with Physical Disabilities (PDUNIPPD), New Delhi during the last five years. As regards to other institutes, it is stated that:-

- Review of functioning of the National Institute for Locomotor Disabilities (NILD), Kolkata and CRC is conducted by Department of Empowerment of Persons with Disabilities at regular intervals.
- (ii) Swami Vivekanand National Institute of Rehabilitation Training and Research (SVNIRTAR), Cuttack:

The Staff Inspection Unit (SIU), Ministry of Finance, Department of Expenditure was entrusted the work study in the year 2014. The Report of with which regard to sanctioned strength, posts abolished, new posts assessed was submitted in October, 2016.

- (iii) Department of Empowerment of Persons with Disabilities, Ministry of Social Justice and Empowerment (MSJ&E) conducts review meetings to evaluate the activities of the Institute. Ali Yavar Jung National Institute Of Speech And Hearing Disabilities (Divyangjan) (AYJNISHD), Mumbai:
- (iv) National Institute for the Empowerment of Persons with Intellectual Disabilities (NIEPD), Secunderabad:

During 2016-17, the Staff Inspection Unit, Department of Expenditure, Ministry of Finance, Government of India conducted the Work Measurement Study of the Institute and its Regional Centres/MSEC located at Noida, Kolkata and Navi Mumbai. The CAG carries out transaction and financial audit on regular basis. The General Council of NIEPID has constituted a committee for impact study of functioning of CRCs on yearly basis. Apart from the above the General Council and Executive Council of the Institute continuously monitor the functioning of NIEPID.

(v) National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD), Chennai: Regularly conducts evaluation study by using feedback from the clients, student's beneficiaries and various stakeholders. As per the evaluation study the annual action plan is prepared and goals are set. (vi) Indian Sign Language Research And Training Centre (ISLRTC), New Delhi:

No Separate evaluation has been done, however, EC and GC of the Institute monitor the performance of the Institute.

7.8 On being enquired whether any periodic evaluation is conducted in order to assess the quality of services rendered and to enhance the functioning of Institutes and CRC's, the Committee were informed in the written reply that:-

"The functioning of NIs is overseen by the Executive Council (EC) and Governing/General Council (GC). The meeting of the EC is generally held quarterly and the meeting of the GC is mostly held on yearly basis. The ECs of these NIs are mostly chaired by the Joint Secretary of the Department and the GCs are mostly chaired by the Secretary of the Department, except in case of recently set up NIMHR where the GC is chaired by an academician and the EC by the Director of the Institute. Apart from overseeing the functioning of NIs, ECs/GCs also provide suitable guidance to these NIs from time to time. Further, C&AG carries out the audit of accounts of all the Institutes on annual basis and their Annual Report along with audited accounts are laid before both the houses of Parliament."

7.9 The Committee find that the National Institutes are headed by Director level Officer except for NIMHR and ISLRTC where a Joint Secretary level Officer is appointed as the Director. These Institutes have a two tier governing structure *i.e* General Council and Executive Council to oversee the functioning of National Institutes. The General Council and Executive Council of Institutes are headed by Secretary and Joint Secretary, Department of Empowerment of Persons with Disabilities respectively whereas General Council and Executive Council of National Institute of Mental Health Rehabilitation are headed by an academician and Director NIMHR respectively. The Committee are not able to understand the reasons for not maintaining uniformity in appointment of heads of these Institutions as well as heads of General Council and Executive Council of National Institutes and would like to be apprised of the same. The Committee would rather prefer that Academicians/Experts in the field of various disabilities should be appointed as heads so that they are able to effectively contribute in the growth of the National Institutes. The Committee would therefore like to recommend that a High powered Committee should be set-up to look into this issue and take a considered view in this direction.

7.10 The Committee are perturbed to note that in most of the Institutes, no evaluation study has been conducted in the recent past. It is also evident from the information provided to the Committee that the Institutes do not have any standard mechanism to evaluate their day-to-day functioning. In the absence of evaluation system, the Committee are not able to understand the basis of assessment of the performance of the Institutes to identify any shortcomings in the functioning of the Institutes and suggest improvements. The Committee strongly advocate that the performance of the Institutes and Composite Regional Centres should be periodically reviewed. The Department needs to take a view on periodic evaluation of the Institutes and CRCs and establish an in-house monitoring mechanism for day to day functioning of the Institutes/ Composite Regional Centres to bring out their best. The Committee are happy to note that steps taken to develop portal with regard to distribution of assistive devices and equipments to the beneficiaries is one of the steps in the direction of monitoring but are not aware of the timeline by which this Portal is likely to be developed.

The Committee would appreciate if this Portal is developed in a time bound manner so that the beneficiaries get benefit from it. The Committee would like to be apprised of the action taken in this regard.

NEW DELHI;

<u>15 December, 2022</u> 24 Agrahayana, 1944 (Saka) RAMA DEVI Chairperson, Standing Committee on Social Justice and Empowerment

ANNEXURE

STATEMENT OF OBSERVATIONS/RECOMMENDATIONS

| SI.No | Para No. | Observations/ Recommendations |
|-------|----------|---|
| 1. | 1.10 | The Committee note that three Legislations viz. The |
| | | Rehabilitation Council of India Act, 1992; The National Trust |
| | | for the Welfare of Persons with Autism, Celebral Palsy, Mental |
| | | Retardation and Multi Disabilities Act, 1999 and The Rights of |
| | | Persons with disabilities Act, 2016 for the Welfare and |
| | | Empowerment of persons with various disabilities have been |
| | | enacted. The Committee further note that nine autonomous |
| | | National Institutes have been established since 1975 under |
| | | the administrative control of Ministry of Social Justice and |
| | | Empowerment (Department of Empowerment of Persons with |
| | | Disabilities) to develop human resources in the field of |
| | | disability, provide rehabilitation services to the persons with |
| | | disabilities, conduct research, etc. for the identified 21 |
| | | disabilities. The Committee strongly feel that these efforts of |
| | | Government of India are commendable as their aim is to |
| | | enable the divyangjan live their lives in a better way through |
| | | rehabilitation facilities available under the various |
| | | Acts/Schemes/Orgnisations meant for the welfare of disabled |
| | | persons. In this connection the Committee observed from |
| | | some reports that few National Institutes are likely to be |

| | | manual classes there there were accounted by the |
|----|------|--|
| | | merged/ closed. However, later they were assured by the |
| | | Secretary, Department of Empowerment of Persons with |
| | | Disabilities during the evidence before the Committee, that no |
| | | National Institute is going to be closed down. The Committee |
| | | were, however, informed that the process of clustering of |
| | | Institutes have been started and due to this process, the |
| | | activities of the Institutes will further progress and the |
| | | autonomy, individuality and speciality of any Institute will not |
| | | be adversely affected except for the alteration in the |
| | | administrative structure. In view of the assurance given by the |
| | | Secretary, the Committee believe that no action would be |
| | | taken by the Department which is detrimental for the Institutes |
| | | as well as for the welfare of disabled persons. They would like |
| | | to be apprised of the status of the said clustering exercise at |
| | | action taken stage. |
| 2. | 1.11 | The Committee find that the figure of total Divyangjan |
| | | population of 2.68 crore is based on the 2011 census and |
| | | express their concern whether it is actually reflective of |
| | | current status of disabled population. The Committee feel |
| | | that the actual number of disabled persons could be much |
| | | higher, as the available figure is more than 10 years old. |
| | | Therefore, they believe that the Department is aware of the |
| | | estimated number of PwDs in the country today in order to |
| | 1 | |

| | | project a realistic assessment of resources required, |
|----|------|--|
| | | |
| | | allocation of funds and set reasonable targets. This will also |
| | | hold true for the requirement of trained professional such as |
| | | physiotherapists, counsellors, doctors, paramedics, etc. |
| | | where actual numbers, in all probability, is not commensurate |
| | | to the requirement. The Committee, therefore, urge the |
| | | Department to take into cognizance their observation while |
| | | setting further outcomes, and strive to make all NIs optimally |
| | | functional for the Divyang population. |
| 3. | 2.15 | The Committee note that 11 Regional Centres of 5 National |
| | | Institutes have been established across the country to |
| | | provide specialized services in the field of various disabilities. |
| | | The Committee also note that 21 Composite Regional Centres |
| | | have been approved to be set up under various National |
| | | Institutes as Outreach and Extension Centres. Out of these 13 |
| | | Composite Rehabilitation Centres have been approved since |
| | | 2014-15. The Committee are surprised to find that the |
| | | infrastructure of various Regional Centres and Composite |
| | | Rehabilitation Centres (CRCs) is not sufficient as many of |
| | | these Centres are running in rental/temporary buildings and |
| | | buildings of several CRCs are under construction as well. The |
| | | Committee have been informed that the cost of establishment |
| | | and running of the CRC is fully borne by the Department. At |
| I | 8 | |

the same time, one provision stipulates that CRCs will be established in States/UTs, if required land and temporary accommodation is provided free of cost by the concerned States/UTs. The Committee feel that such a condition may delay the setting up of CRCs. Hence, it is advised that Department may evolve a mechanism so that the approved CRCs are established in a time bound manner. Since augmentation of infrastructure of CRCs is time consuming, the Department, may, as a temporary measure, utilize the premises of Government-run-Senior Citizen Homes/Bal Vatikas/ CGHS Dispensaries or charitable institutions such as Rotary Club, Helpage India etc. in order to increase the outreach of NIs. The Committee are confident that some, if not all, organizations would respond in a positive manner and be amenable to provide space for such an initiative. It will also be pertinent to mention that the Standing Committee on Social Justice and Empowerment, during their study visit to the National Institute for Empowerment of Persons with Multiple Disabilities(NIEPMD), Chennai, had given certain directions on the facilities provided to beneficiaries of the Institute such as implementation of mid-day meal scheme, construction of waiting hall for parents and setting up of Hydro Therapy Unit at the Institute. The Committee are happy

| | | to note that the action has been taken by the |
|----|------|--|
| | | Department/Institute on all the observations made by them |
| | | and hope that the Nis would take feedback from beneficiaries |
| | | |
| | | to augment their facilities as per their requirement regularly. |
| 4. | 2.16 | The Composite Regional Centres (CRCs) have been merged |
| | | with National Institutes from 2020-2021. The Committee desire |
| | | to know if the intended objectives behind this measure has |
| | | been fulfilled. They also desire that the proposals received for |
| | | opening of Composite Regional Centres from States/UTs |
| | | should be considered and decided upon at the earliest and in |
| | | case any issue arises in approving any proposal, those |
| | | should be settled in coordination with concerned State |
| | | Governments/ UTs so that the purpose of establishing CRCs |
| | | is not defeated. |
| 5. | 3.12 | The Committee note with dismay the gap in complete |
| | | utilisation of budgetary allocations. The Department of |
| | | Empowerment of Persons with Disabilities failed to spend the |
| | | Grant-in-Aid under "Support to National Institutes" from 2018- |
| | | 19 to 2021-22 in respect of National Institutes and Composite |
| | | Regional Centres as from the budgetary allocation of ₹1281.72 |
| | | crore, ₹ 1218.29 crore could be spent. The Committee also |
| | | note that the Grant-in-Aid released to most of the National |
| | | Institutes has almost remained static during 2017-18 to 2021- |

22, rather it has gone down in respect of National Institute for Locomotor Disabilities in 2020-2021 and 2021-2022. The Committee are sad to find that the situation is similar for Composite Regional Centres as expenditure of Composite Regional Centre, Guwahati came down from ₹ 233.75 lakh in 2018-19 to ₹184.00 lakh in 2021-22. The expenditure at Composite Regional Centres at Lucknow, Patna, Kozhikode, Nellore, Nagpur, Sikkim, Sundernagar, Rajnandgaon, Tripura, Gorakhpur and Balangir also came down in 2020-2021. The Committee are unable to comprehend the reasons due to which the grant-in-aid released could not be spent particularly when these Institutions have been vested with the responsibility of development of human resources, render rehabilitation services, conduct research, etc. in the field of disability, which is a vast area to undertake several activities. Not only the Department performed poorly in utilisation of funds, the situation in terms of beneficiaries was also found to be discouraging. The total number of beneficiaries in 2017-18 were 19.24 lakh which came down to 18.97 lakh in 2021-22 even after establishment of two new Institutes viz., Indian Sign Language Research and Training Centre, Delhi and the National Institute of Mental Health Rehabilitation, Sehore. The Committee are also not impressed with the number of

| | | beneficiaries at CRCs as number of beneficiaries has gone |
|----|-----|---|
| | | down at various Composite Regional Centres. The Committee |
| | | are of the strong view that had these Institutions/CRCs |
| | | performed well the allocation of funds would have increased |
| | | as the cost of assistive devices has been rising and the ambit |
| | | of disabilities has substantially increased after the enactment |
| | | of RPwD Act, 2016. Quite clearly, the NIs and CRCs are not |
| | | performing optimally. Perhaps, the newly established NIs |
| | | have also not started their proper functioning. Hence, the |
| | | Committee feel that there is an urgent need to take effective |
| | | measures to utilize budgetary allocation/ grant-in-aid fully by |
| | | all the National Institutes / RCs/CRCs so that more and more |
| | | disabled persons are benefitted by the facilities provided by |
| | | the Government to them. The Committee would also like the |
| | | Department to concentrate on North-Eastern States and |
| | | ensure that Department spend 10% of the total expenditure in |
| | | North-Eastern States and take suitable measures to establish |
| | | CRCs in the region including small cities in other parts of the |
| | | country so that the needs of the Divyangjan are met |
| | | universally. |
| 6. | 4.5 | The Committee are disappointed to note that the faculty |
| | | members in most of the Institutes are much less in |
| | | comparison to their sanctioned strength. Insufficient faculty |
| | | |

even in those Institutes which were established decades back is an alarming revelation. The situation at CRCs is also not good. To give an instance, the sanctioned strength for all the CRCs of National Institute for Locomotar Disabilities is 26, out of which 20 posts are vacant. Similarly, out of the sanctioned strength of regular posts of 20 and contractual posts of 106 at CRCs Vivekanand National of Swami Institute of Rehabilitation Training and Research, 8 regular posts and 58 contractual posts are vacant. Since the situation at other Institutes/CRCs is equally bad, the Committee would suggest that the Department needs to thoroughly examine the reasons, address the same early and get the vacancies filled so that the students and beneficiaries do not suffer. It must also be ensured that recruitment is done in a fixed time frame in future and is not left to linger for years together. The Committee have further observed that the information with regard to the sanctioned/actual strength is not available in the Annual Report of the Institutes, and are of the strong opinion that such information should be made available in Annual Reports of the Institutes. In this context, the Committee notice that an assessment study of teaching/non teaching staff of 5 National Institutes was conducted by Staff Inspection Unit, Ministry of Finance, Department of

| | | Expenditure way back in 2016 which had recommended for |
|----|-----|---|
| | | creation of some new posts and abolition of a number of |
| | | posts in these Institutes. The Committee are surprised that |
| | | while several posts were abolished on the basis of |
| | | recommendations of SIU, the proposal for creation of new |
| | | posts was not approved. The Committee reiterate that for the |
| | | smooth functioning of the Institutes, it is imperative that |
| | | number of staff and faculty should be in consonance with the |
| | | actual requirement so that the functioning of these Institutes |
| | | is not hampered due to shortage of staff. The Committee, |
| | | therefore, desire that the Department should once again |
| | | pursue the matter of creation of posts in these Institutes with |
| | | the Ministry of Finance because the establishment of the |
| | | Institutes has no meaning if those are not able to |
| | | perform/function due to lack of requisite personnel. |
| 7. | 5.6 | The Committee are dismayed to note that the National |
| | | Institutes including Composite Regional Centres mandated to |
| | | conduct courses to train in various fields for the rehabilitation |
| | | of disabled persons are not able to get the requisite number |
| | | of candidates for the same. This holds true in almost all the |
| | | Institutes/ Composite Regional Centres. It is a cause of great |
| | | concern particularly for courses run in the Institutes, which |
| | | came into existence long time back. Besides such courses |
| | | concern particularly for courses run in the Institutes, which |

| | | need specialized softwares and equipments with considerable |
|----|-----|---|
| | | cost, which must be utilized fully. The Committee have been |
| | | informed about a recent initiative, wherein the Department has |
| | | requested the Rehabilitation Council of India to evolve |
| | | courses, which are popular and are more inclusive so that the |
| | | cases of multiple disabilities are taken care of. The Committee |
| | | feel that such corrective measures should have been taken |
| | | earlier. Lack of candidates for courses has a direct impact on |
| | | availability of good trainers for the rehabilitation of |
| | | Divyangjan. The Committee therefore, desire that the |
| | | Department should vigorously pursue with the Rehabilitation |
| | | Council of India and take advice from experts as well to |
| | | urgently design courses, which are attractive to potential |
| | | students and meet the current requirement of |
| | | trainers/counsellors for divyangjan. The Committee also |
| | | recommend that the Department should direct all the |
| | | Institutes to take suitable measures to publicize the courses |
| | | well so that no seats in the courses are left vacant in future. |
| 8. | 5.7 | The Committee note that one of the objectives of the National |
| | | Institutes is to conduct research in various types of |
| | | disabilities. Several major researches have been conducted |
| | | by various National Institutes in the field of assistive devices, |
| | | rehabilitation and other crucial aspects related to various |
| | | |

| | | disabilities However the Committee are unbown to find that |
|----|-----|--|
| | | disabilities. However, the Committee are unhappy to find that |
| | | three Research projects at National Institute for the |
| | | Empowerment of Persons with Intellectual Disabilities are yet |
| | | to start as funds are not received. The Committee are of the |
| | | strong opinion that the field of research in the disability |
| | | sector is lacking behind and hence due care has to be taken |
| | | so that more research projects are undertaken for indigenous |
| | | development of technology, which would make the lives of |
| | | Divyangjan comfortable and self-reliant. The Committee |
| | | would therefore like the Department to focus more on the |
| | | research activities of the Institutes and allocate adequate |
| | | dedicated funds for this purpose so that research does not |
| | | suffer for want of funds. |
| 9. | 5.8 | The Committee, during the course of their deliberation with an |
| | | NGO working for welfare of Leprosy Cured Persons (LPCs), |
| | | have found that Leprosy cured but deformed persons also |
| | | constitute a category of disabled persons. But unlike others |
| | | the nature and extent of deformity in such persons cannot be |
| | | fixed since Leprosy is a progressive disease. The Committee |
| | | feel that the expertise and wide outreach of National Institutes |
| | | can be effectively utilized to provide services, treatment and |
| | | rehabilitation of LPCs. The National Institute for Locomotor |
| | | Disabilities and Swami Vivakanand National Institute of |
| | | |

| | | Rehabilitation Training and Research are at the forefront of |
|-----|-----|--|
| | | treatment and rehabilitation of persons with Locomotor |
| | | disabilities and their funds can be effectively utilised to |
| | | provide the customized aids and appliances required by such |
| | | LPCs, who otherwise lead a miserable life with extreme |
| | | poverty and social stigma. Further, research for betterment of |
| | | quality of life of LPCs can also be undertaken by these |
| | | Institutes. The Committee desire to be apprised of the |
| | | Department's plan of action on their particular matter. |
| 10. | 6.8 | The Committee acknowledge the efforts of the Department in |
| | | tackling the issues relating to mental health as two National |
| | | Institutes viz National Institute for the Empowerment of |
| | | Persons with Intellectual Disabilities at Secunderabad and |
| | | National Institute of Mental Health Rehabilitation at Sehore |
| | | were established in 1984 and in 2019 respectively to address |
| | | the Mental Health issues. The Committee find that the National |
| | | Institute for the Empowerment of Persons with Disabilities |
| | | set up to build capacities for empowerment of persons with |
| | | intellectual disabilities have taken several initiatives such as |
| | | development of Teaching learning material kits, conducted |
| | | conferences/ training programmes, research etc. However, the |
| | | progress made by the Institute is perhaps not keeping pace |
| | | with the number of persons suffering from intellectual |
| | | |

| | | disabilities. The Committee feel that the National Institute for |
|-----|-----|---|
| | | |
| | | the Empowerment of Persons with Intellectual Disabilities |
| | | could have done much more and developed expertise in the |
| | | field as it came into existence way back in 1984. The |
| | | Committee, therefore, desire that the Institute should gear up |
| | | their research activities to tackle the growing cases of |
| | | intellectual disability in the country. They also desire that the |
| | | Institute should increase the number of workshops organized |
| | | by them across the country so that adequate awareness about |
| | | the intellectual disabilities/mental illness would be generated |
| | | in the society. |
| 11. | 6.9 | The Committee are not satisfied with the progress of |
| | | construction work of the building of National Institute of |
| | | Mental Health Rehabilitation established at Sehore. The |
| | | Institute established in 2019 is yet to be shifted in their own |
| | | building, which, the Committee cannot but attribute to lack of |
| | | serious efforts on the part of the executing agency. They are |
| | | unable to understand as to how the entrusted responsibility |
| | | will be shouldered by the Institute if it does not have its own |
| | | campus with requisite infrastructure. Hence, the Committee |
| | | recommend that the work must be completed in a time bound |
| | | manner so that the Institute is fully able to undertake the |
| | | responsibility entrusted to it. The Committee would also like |

| | to recommend that instead of employing feaulty members on |
|------|---|
| | to recommend that instead of employing faculty members on |
| | contractual basis, it should be ensured that the required |
| | faculty is recruited permanently so that the Institute is able to |
| | give quality and continuous service to the needy persons. |
| 6.10 | The Committee note that the cases of autism in children have |
| | been found to be widely prevalent in the Country. However, |
| | not much progress has been made to deal with such a |
| | complex disability. The Committee are happy as they have |
| | been informed that autism is now being considered a |
| | disability which was not the case prior to enactment of RPwD |
| | Act, 2016 and that a tool to assess autism has also been |
| | developed in India. The Committee further note that with the |
| | help of National Institute for the Empowerment of persons |
| | with Intellectual disabilities and National Institute of Mental |
| | Health Rehabilitation, the problems associated with autism |
| | will be taken care of. At the same time, the Committee also |
| | hope that necessary action will be taken including research |
| | by the Institutes for early detection of symptoms of autism in |
| | children so that treatment can start at the initial stage itself. |
| | As such children may have below or above average IQ level, |
| | the Committee feel that self help skills, communication skills, |
| | occupational therapy, speech therapy, counselling facility for |
| | family members and vocational training will be quite useful for |
| | 6.10 |

| | | development of each children. The Association (based on the |
|-----|-----|---|
| | | development of such children. The Committee therefore feel |
| | | that these two Institutions can play a major role to assess the |
| | | needs of such children and also take necessary measures to |
| | | provide counselling and proper guidance to their parents so |
| | | that they can understand specific requirement of their child. |
| 13. | 7.9 | The Committee find that the National Institutes are headed by |
| | | Director level Officer except for NIMHR and ISLRTC where a |
| | | Joint Secretary level Officer is appointed as the Director. |
| | | These Institutes have a two tier governing structure <i>i.e</i> |
| | | General Council and Executive Council to oversee the |
| | | functioning of National Institutes. The General Council and |
| | | Executive Council of Institutes are headed by Secretary and |
| | | Joint Secretary, Department of Empowerment of Persons with |
| | | Disabilities respectively whereas General Council and |
| | | Executive Council of National Institute of Mental Health |
| | | Rehabilitation are headed by an academician and Director |
| | | NIMHR respectively. The Committee are not able to |
| | | understand the reasons for not maintaining uniformity in |
| | | appointment of heads of these Institutions as well as heads of |
| | | General Council and Executive Council of National Institutes |
| | | and would like to be apprised of the same. The Committee |
| | | would rather prefer that Academicians/Experts in the field of |
| | | various disabilities should be appointed as heads so that they |
| | | |

| | | are able to effectively contribute in the growth of the National |
|-----|------|--|
| | | are able to enectively contribute in the growth of the National |
| | | Institutes. The Committee would therefore like to recommend |
| | | that a High powered Committee should be set-up to look into |
| | | this issue and take a considered view in this direction. |
| 14. | 7.10 | The Committee are perturbed to note that in most of the |
| | | Institutes, no evaluation study has been conducted in the |
| | | recent past. It is also evident from the information provided to |
| | | the Committee that the Institutes do not have any standard |
| | | mechanism to evaluate their day-to-day functioning. In the |
| | | absence of evaluation system, the Committee are not able to |
| | | understand the basis of assessment of the performance of the |
| | | Institutes to identify any shortcomings in the functioning of |
| | | the Institutes and suggest improvements. The Committee |
| | | strongly advocate that the performance of the Institutes and |
| | | Composite Regional Centres should be periodically reviewed. |
| | | The Department needs to take a view on periodic evaluation of |
| | | the Institutes and CRCs and establish an in-house monitoring |
| | | mechanism for day to day functioning of the Institutes/ |
| | | Composite Regional Centres to bring out their best. The |
| | | Committee are happy to note that steps taken to develop |
| | | portal with regard to distribution of assistive devices and |
| | | equipments to the beneficiaries is one of the steps in the |
| | | direction of monitoring but are not aware of the timeline by |
| | | |

| w | which this Portal is likely to be developed. The Committee |
|----|---|
| w | ould appreciate if this Portal is developed in a time bound |
| m | nanner so that the beneficiaries get benefit from it. The |
| с | committee would like to be apprised of the action taken in |
| tł | his regard. |
| tł | nis regard. |