STANDING COMMITTEE ON SOCIAL JUSTICE AND EMPOWERMENT (2007-2008)

(FOURTEENTH LOK SABHA)

MINISTRY OF SOCIAL JUSTICE AND EMPOWERMENT

"SCHEME OF ASSISTANCE TO DISABLED PERSONS FOR PURCHASE/FITTING OF AIDS AND APPLIANCES" (ADIP)

TWENTY-SEVENTH REPORT



LOK SABHA SECRETARIAT NEW DELHI August, 2007/Bhadrapada ,1929 (Saka)

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TWENTY-SEVENTH REPORT

Presented to Lok Sabha on 06.09.2007

Laid in Rajya Sabha on 06.09.2007



LOK SABHA SECRETARIAT NEW DELHI August, 2007/Bhadrapada ,1929 (Saka)

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COMPOSITION OF THE STANDING COMMITTEE ON SOCIAL JUSTICE AND EMPOWERMENT(2007-2008)

Smt. Sumitra Mahajan - CHAIRPERSON

MEMBERS LOK SABHA

- 2. Mohd. Shahid Akhlaque
- 3. Shri Mahaveer Bhagora
- 4. Shri Eknath M. Gaikwad
- 5. Shri Loganathan Ganesan
- Shri Syed Shah Nawaz Hussain*
- 7. Shri Haribhau Jawale
- 8. Shri Bhai Lal
- Shri Tek Lal Mahato
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- 11. Shri Kailash Meghwal
- 12. Shri Rupchand Murmu
- 13. Shri Jual Oram
- 14. Shri Ram Chandra Paswan
- 15. Shri Rabindar Kumar Rana
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- 17. Dr. R. Senthil
- 18. Smt. Pratibha Singh
- 19. Shri Lalit Mohan Suklabaidya
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RAJYA SABHA

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- 28. Shri Dharam Pal Sabharwal
- 29. Shri Veer Singh
- 30. Ms. Anusuiya Uikey
- 31. Shri Nand Kishore Yaday

^{*} Ceased to be Member of the Committee w.e.f. 30.8.2007.

SECRETARIAT

Dr. (Smt.) P.K Sandhu
 Shri Ashok Sarin
 Additional Secretary
 Joint Secretary

3. Shri R.K. Saxena - Director

Shri Bhupesh Kumar
 Shri Yash Pal Sharma
 Executive Assistant

INTRODUCTION

- I, the Chairperson of the Standing Committee on Social Justice and Empowerment (2007-2008) having been authorized by the Committee to submit the Report on their behalf, present this Twenty-seventh Report on the subject "Scheme of Assistance to disabled persons for purchase/fitting of Aids and Appliances" (ADIP).
- 2. The Committee took evidence of the representatives of the Ministry of Social Justice and Empowerment on 1st June, 2006 and 27th October, 2006. The Committee wish to express their thanks to the officers of the Ministry of Social Justice and Empowerment for placing before them the detailed written notes on the subject and for furnishing whatever information the Committee desired in connection with the examination of the subject.
- 3. For facility of reference and convenience, the observations and recommendations of the Committee have been printed in thick type in the body of the Report and have also been reproduced in a consolidated from in Appendix I to the Report.
- 4. The Report was considered and adopted by the Committee at their sitting held on 31st August, 2007.

NEW DELHI; August, 2007 Bhadrapada, 1929 (Saka) Smt. SUMITRA MAHAJAN, Chairperson, Standing Committee on Social Justice and Empowerment

REPORT

- 1.1 'A Scheme of assistance to disabled persons for purchase / fitting of Aids and Appliances' (ADIP) was launched by the Ministry of Social Justice and Empowerment in the year 1981 with the basic objective of providing aids and appliances for promoting physical, social and psychological rehabilitation of person with disabilities for enhancing their economic potential.
- 1.2 The Ministry have further stated that this scheme assists the needy physically handicapped persons in procuring durable, sophisticated and scientifically manufactured, modern "standard" aids and appliances that can promote their physical, social and psychological rehabilitation. The aids and appliances supplied under the scheme must be ISI marked or conform to BIS specifications.
- 1.3 The scheme is implemented in coordination with State Governments through various implementing agencies such as the District Disability Rehabilitation Centres (DDRCs), NGOs, National Institutes and ALIMCO, which is a PSU under the Ministry. The implementing agencies are provided with grant-in-aid for purchase, fabrication and distribution of aids and appliances in conformity with the guidelines of the Scheme.
- 1.4 According to the Ministry, under the existing scheme persons with disabilities (PWDs) with an income upto Rs. 6,500/- per month get the aids/appliances free. For persons with income between Rs. 6501/- to

10,000/- the aids are provided at 50% of the cost. Only those aids/appliances, which do not cost more than Rs. 6,000/- are covered under the scheme.

- 1.5 The Ministry have intimated that the lifespan of device differs from device to device. A beneficiary under the scheme can approach for fresh ADIP grant after a period of three years which may be taken as a reasonable period for effective utility of a device. Assistive device is given to a Person with Disability after three years. In case of children below 12 years it is given after one year. Depending upon the recommendation of Rehabilitation expert more than one assistive device can also be given to a person with disability.
- 1.6 According to the Ministry, the ADIP Scheme had performed very well since its inception in 1981. During the course of the implementation, through interaction with NGOs, professionals and the beneficiaries, the scheme was constantly monitored and reviewed. The scheme was revised in 1998 and again in 2005 to reach out to as large a number of disabled persons as possible and to make it result oriented. The Scheme revised in 2005 intended to address the following:-
 - (i) Improving the reach of the scheme & encouraging its spread especially to the areas not covered so far.
 - (ii) Facilitating the maintenance, upkeep & better utilization of the assistive devices provided.

- (iii) To ensure the provision of state of the art, newly developed, more comfortable assistive devices by continuously updating the list of assistive devices provided/fitted under the scheme.
- (iv) The Scheme was earlier revised in 1998. However, since the prices had gone up since then the income limit for eligibility for 100% and for 50% concession was sought to be raised.
- 1.7 The Committee have been informed by the Ministry that there are 2,19,06,769 people in the country who are suffering from visual, hearing, speech and locomotive disabilities as per 2001 census. The statement indicating disability-wise, State-wise, number of persons with disabilities (PWD) in the country, as per the Census, 2001, is as follows:-

S. No.	State/UT	Visual disability	Speech disability	Hearing disability	Locomotor disability	Mental Disability	
							Total
1	Jammu & Kashmir	208,713	16956	14,157	37,965	24,879	302,670
2	Himachal Pradesh	64,122	12,762	15,239	46,512	17,315	155,950
3	Punjab	170,853	22,756	17,348	149,758	63,808	424,523
4	Chandigarh	8,422	882	607	3,828	1,799	15,538
5	Uttaranchal	85,668	16,749	15,990	56,474	19,888	194,769
6	Haryana	201,358	24,920	27,682	151,485	49,595	455,040
7	Delhi	120,712	15,505	8,741	64,885	26,043	235,886
8	Rajasthan	753,962	73,147	75,235	400,577	109,058	1,411,979
9	Uttar Pradesh	1,852,071	255,951	128,303	930,580	286,464	3,453,369
10	Bihar	1,005,605	130,471	73,970	512,246	165,319	1,887,611
11	Sikkim	10,790	3,174	3,432	2,172	799	20,367
12	Arunachal Pradesh	23,079	2,429	3,072	3,474	1,261	33,315
13	Nagaland	9,968	4,398	5,245	4,258	2,630	26,499
14	Manipur	11,713	2,769	2,994	6,177	4,723	28,376
15	Mizoram	6,257	2,006	2,421	2,476	2,851	16,011
16	Tripura	27,505	5,105	5,699	13,970	6,661	58,940
17	Meghalaya	13,381	3,431	3,668	5,127	3,196	28,803
18	Assam	282,056	56,974	51,825	91,970	47,475	530,300
19	West Bengal	862,073	170,022	131,579	412,658	270,842	1,847,174
20	Jharkhand	186,216	39,683	28,233	138,323	55,922	448,377
21	Orissa	514,104	68,673	84,115	250,851	103,592	1,021,335
22	Chhattisgarh	160,131	30,438	34,093	151,611	43,614	419,887

-							
23	Gujarat	494,624	66,534	70,321	310,765	103,221	1,045,465
24	Daman & Diu	1,898	189	120	690	274	3,171
25	Dadra & Nagar Haveli	2,346	295	337	795	275	4,048
26	Maharashtra	580,930	113,043	92,390	569,945	213,274	1,569,582
27	Madhya Pradesh	636,214	75,825	85,354	495,878	115,257	1,408,528
28	Andhra Pradesh	581,587	138,974	73,373	415,848	155,199	1,364,981
29	Karnataka	440,875	90,717	49,861	266,559	92,631	940,643
30	Goa	4,393	1,868	1,000	4,910	3,578	15,749
31	Lakshadweep	603	207	147	505	216	1,678
32	Kerala	334,622	67,066	79,713	237,707	141,686	860,794
33	Tamil Nadu	964,063	124,479	72,636	353,798	127,521	1,642,497
34	Pondicherry	10,646	1,818	2,277	8,830	2,286	25,857
35	Andman & Nicobar	3,321	652	545	1,870	669	7,057
							2,19,06,769

- 1.8 During evidence, when the Committee enquired about the number of persons benefited under ADIP Scheme, the representatives of the Ministry stated that it is about Eight Lakhs.
- 1.9 The Ministry have furnished the details of persons benefited under the ADIP Scheme which is annexed (Annexure I). However, the disability-wise information about the persons benefited under the scheme is not available in the Ministry presently.
- 1.10 On being enquired about the physical annual targets fixed under this scheme by the funded agencies, the Ministry stated that State/UT wise targets are not fixed. The Committee asked that in the absence of any target, how the achievements of the scheme are assessed, the Ministry have stated that targets are assessed with reference to proposals submitted by implementing agencies. In their proposals the implementing agencies submit the list of beneficiaries. The progress of work done by the implementing

agencies is monitored through utilization certificates submitted at the time of release of IInd installment.

FINANCIAL ALLOCATIONS

1.11 The Committee have been informed that the implementing agencies submit their proposals to the Ministry and necessary action is taken on their proposals while projecting the Budgetary Estimates. The allocation of funds to the implementing agencies has increased over the years as can be seen from the table below:-

Budget allocation / release of funds to implementing agencies during Tenth Plan

S.No.	Financial year	Budget Estimate (Rs. in crores)	Amount released (Rs. in crore)
1	2002-2003	54.00	57.00
2	2003-2004	57.00	55.00
3	2004-05	60.00	63.18
4	2005-06	60.00	57.91
5	2006-07	71.2	24.10 (upto Oct.2006)

1.12 The Committee enquired whether the State-wise allocation is made under the scheme in proportion to the number of persons with disabilities of that State? The Ministry have informed that allocation is based upon the proposals sent by various implementing agencies that identify the

beneficiaries in a particular area. The Ministry have also stated that Statewise allocation is not made in the scheme.

1.13 Regarding budgetary allocation, the Secretary, Ministry of Social Justice and Empowerment stated during evidence as under:

"The budgetary allocation for the scheme has increased from Rs. 55 crore in 2003-2004 to Rs. 60 crore in 2005-2006. I am glad to inform the august Committee that the Ministry has almost fully utilized the amount under the scheme. This year, the budgetary provision is Rs. 71.2 crore out of which Rs. 23.62 crore has been released to various implementing agencies of the scheme. With the completion of the rationalization exercise, the momentum for the release of funds to the implementing agencies under the scheme is likely to pick up."

"We are very much aware that we would like to make more and more efforts to have greater coverage considering the magnitude of the problem, and considering the urgency to address this problem to give quick relief to the people. In fact, our budget has been increasing year after year. I have the figures with me for the last three years, and the current year. In 2003-04, the budget provision of Rs. 55 crore was made under the ADIP scheme. In 2005-2006, this was increased to Rs. 60 crore, and the Committee would be happy to note that in this financial year there is a budget provision of Rs. 71.20 crore under this scheme. We would absolutely welcome if as a result of the recommendations of this esteemed Committee our budget is augmented. We would be very happy with it, and we promise that we would make all efforts to utilize the augmented budget."

IMPLEMENTING AGENCIES

- 1.14 The Ministry have informed that the ADIP Scheme is implemented in coordination with State Governments through various implementing agencies such as the District Disability Rehabilitation Centres (DDRCs) NGOs, National Institutes and ALIMCO, which is a PSU under the Ministry. The implementing agencies are provided with grant-in-aid for purchase, fabrication and distribution of aids and appliances in conformity with the guidelines of the Scheme.
- 1.15 Regarding implementation of the scheme in the uncovered areas the Secretary, Ministry of Social Justice and Empowerment stated during evidence:-

"The Ministry is seized with the problem of need for streamlining and rationalizing the implementation mechanism. The steps are already on in the Ministry to rationalize to address the problems of regional imbalance and overlapping of operations. The implementing agencies are being encouraged to operate in the hitherto uncovered districts, which include the North East as well as Jammu and Kashmir."

A. NGOs

- 1.16 The Committee enquired about the mechanism for providing aids and appliances to disabled persons at district level and far flung areas. The Ministry stated that the implementing agencies hold camps for the purpose under the ADIP Scheme with active participation of State Governments. Efforts are made to cover unserved areas through ALIMCO/National Institutes.
- 1.17 Adding further about the need to address the problems of the remote areas, the Secretary stated during evidence:-

"This is a problem that the Ministry is facing because our main implementing agencies- through which we are implementing this scheme-are the NGOs. Besides, we also have our own District Disabled Rehabilitation Centres (DDRCs). The spread of DDRCs is also limited to certain areas. Therefore, we have been facing this problem.

I very recently had a meeting with the Secretary of one of the States of the North East. He mentioned to me that the Government of that State is not really encouraging the NGOs in that State. Therefore, the Secretary asked me whether we can have liaison with other NGOs to go there, and hold these kinds of camps. I admit that this is one of the real problems that we are facing, but we are making efforts to have more and more such camps in these areas. In fact, we are trying to reach the areas-where these NGOs are not able to reach or DDRCs are not there – through our National Institutes or through ALIMCO."

1.18 The representative of the Ministry of Social Justice and Empowerment, however, agreed that:-

"NGO's are great service providers. They are very close to the people. Therefore, we definitely depend on them."

1.19 The Ministry have furnished details regarding amount of Assistance given to NGOs and other Government agencies during the last three years as follows:-

Year	ALIMCO/NIs (Rs. in lakhs)	NGO	Total (Rs. in lakhs)
2003-04	3500.63	1999.37	5500.00
2004-05	4366.34	1951.66	6318.00
2005-06	3407.72	2383.28	5791.00

1.20 About the methodology adopted by the Government to ensure that funds released to the States, where NGOs or other Government Agencies exist, are effectively utilized for the welfare of the disabled, the Ministry stated

that there are some inbuilt safeguards such as insistence upon recommendations from the State Governments, auditing of accounts of the released aid by chartered accountant and test checking of beneficiaries. Further, implementing agencies are required to furnish list of beneficiaries to introduce an element of transparency. The Ministry is considering displaying the camp-wise details and particulars of beneficiaries on the Ministry Web Site.

1.21 In response to the query about the number of beneficiaries covered by each NGO /other Government Agencies during the last three years, Statewise/UT-wise, the Ministry have stated that the information is not available State-wise/UT-wise as funds are not distributed State-wise/UT Wise.

B. District Disability Rehabilitation Centres (DDRCs)

- 1.22 The Committee have been informed by the Ministry that the DDRC is managed through a District Management Team (DMT) under the chairmanship of District Collector.
- 1.23 The Ministry have further informed that each DDRC would have one each of the following manpower with fixed honorarium and predetermined qualifications. The rehabilitation professionals should preferably be registered with Rehabilitation Council of India (RCI).

1.24 A statement showing details of manpower deployed by DDRCs:

S.No.	Posts	Maximum Honorarium per month (in Rs.)	Qualification
1.	Clinical Psychologist/ Psychologist	6,000/5000	M.Phil in clinical Psychology/MA in Psychology preferably with 2 years experience in the field of disability rehabilitation
2.	Sr. Physiotherapist/ Occupational therapist	6,000	Post Graduate in related field with 5 years experience
3.	Orthopaedically Handicapped Sr. Prosthetist/Orthotist	6,000	Degree in Prosthetic and Orthotic preferably from National Institute with 5 years experience or a diploma in Prosthetic & Orthotic with 6 years experience.
4.	Prosthetist/Orthotist (Technician)	4000	ITI trained with 2/3 years experience
5.	Sr. speech therapist/Audiologist	6000/5000	Post graduate in related field/B.Sc. (Speech & Hearing).
6.	Earmould Technician- cum-hearing aid repairer	4,000	Diploma in Speech & Hearing with knowledge of hearing aids repair/ear mould making
7.	Mobility Instructer	4,000	Matriculation + Certificate Diploma in Mobility
8.	Multipurpose rehabilitation worker	4,000	10+2 with diploma in CBR/MRW course or one year diploma course in early childhood special education with two years of experience.
9.	General staff Clerk/Accountant- cum-	4,000	B.Com/SAS with 2 years experience

	Storekeeper		
10.	Attendant/Peon/Messeng	3,000	VIIIth Pass
	er		

- 1.25 According to the Ministry the scheme does not envisage creation of any permanent posts. The service should be rendered through the manpower appointed on honorary/honorarium/contractual basis. The total expenditure on manpower under the scheme should not exceed Rs.5.64 lakhs per annum. Funds earmarked for honorarium cannot be diverted to fund for additional manpower (i.e. beyond the prescribed manpower in the scheme).
- 1.26 During evidence, the Committee enquired whether the Rehabilitation Centres are rendering the services for which they have been set up and how are these DDRCs functioning? The representative of the Ministry of Social Justice and Empowerment stated:

"DDRC is one of the institutions which we are using for the purpose of running this scheme but the role of the DDRC is much bigger. It is meant to provide longer counseling, awareness and also help in issue of disability certificate. This has a much bigger role which we have envisaged for the DDRCs. There are some problems in the DDRCs in terms of manpower availability. In some places there are some difficulties. To start with we have taken up the scheme for a period of three years and then we further provide this support through another scheme, called the DDRS scheme, which is taken up for a longer period. We want that the DDRCs, which are district management team headed by the DC, should become viable in itself and become a source of service for longer period from its own resources. That is what the objective of the scheme is. That is how it is working. We are giving preference to those areas which are under-served and where the NGOs are not organized and where the NGOs are not able to provide the services. Therefore, we ensure that DDRCs should be opened only in those areas."

1.27 When asked how many DDRCs have been working for the disabled in the country, the Ministry furnished a list of DDRCs reproduced at Annexure-II

C. Red Cross Societies

- 1.28 The Ministry have also informed that States' Welfare Secretaries as well as Commissioners for Disabilities of all States/UTs have been repeatedly requested to promote District Red Cross Societies, NGOs for implementing the ADIP Scheme in their States.
- 1.29 When the Committee enquired, whether all the States/UTs have promoted District Red Cross Societies, NGOs in their respective States, the Ministry stated that they will ascertain the reasons for non operation of the Indian Red Cross Society under ADIP Scheme from those States that have not promoted the Indian Red Cross Societies so far.
- 1.30 During evidence, the Committee pointed out about the steps taken for activating the District Red Cross Society for providing services to the disabled in remote areas, the Secretary in response stated as under:

"As far as need to activate Red Cross Societies is concerned, it is really a very important point. That is one of our policies, especially in those areas which the hon. Member just now mentioned or other areas like North-Eastern regions where NGOs are not there. Therefore, through our National Institutes like ALIMCO we are doing it and where there are no such institutes, it would be a very good option if the Red Cross is activated. So, we would definitely like to take it up with the State Governments."

1.31 On being asked about District Red Cross Societies working for the disabled particularly in North Eastern States, the Ministry have informed that no proposal has come from North East so far.

D. National Institutes

- 1.32 The Committee have been informed by the Ministry that there are seven National Institutes namely:
 - i. National Institute for the Mentally Handicapped, Secunderabad
 - ii. Institute for the Physically Handicapped, Delhi
 - iii. Ali Yavar Jung National Institute for the Hearing Handicapped,Mumbai
 - iv. National Institute of Rehabilitation Training and Research,Cuttak
 - v. National Institute for the Visually Handicapped, Dehradun
 - vi. National Institute for Orthopaedically Handicapped, Kolkata
 - vii. National Institute for Empowerment of persons with Multiple

 Disabilities, Chennai
- 1.33 The Ministry have further stated that National Institute for the Visually Handicapped (NIVH) has been directed to prepare a report that will indicate the adequacy and satisfaction levels of the availability of Braille books in each State. NIVH as well as other Braille books producers ensure availability of Braille books to visually impaired children.
- 1.34 To a query, whether the Low Vision Aids and Braille Books have been included in the list of Aids & Appliances, the Ministry have stated that while low vision aids are provided under the ADIP Scheme, Braille books are

provided free of cost to visually impaired children by various State Education Boards.

1.35 A statement furnished by the Ministry, showing State-wise funds released to NGOs, ALIMCO/NIs during 2004-05 and 2005-06, is given in Annexure III.

E. Artificial Limbs Manufacturing Corporation of India (ALIMCO) Kanpur.

- 1.36 The Ministry have stated that ALIMCO has been manufacturing artificial limbs, accessories and their constituents and promoting their availability, supply and distribution at reasonable cost to the disabled persons, hospitals and other rehabilitation institutions. ALIMCO is a premier organization and is the largest manufacturer of Artificial Limbs, Components and Rehabilitation Aids for the disabled in India.
- 1.37 The Ministry have, however, stated that more research is required in the field of aids and appliances especially by ALIMCO. To a query whether any action plan has been formulated in this regard, the Committee have been informed that the Ministry have been sensitized for more research. The requirement of research is being carefully assessed during the formulation of the annual plan and action taken accordingly. For example, in the annual plan 2004-2005, the following products were taken for design development:-
 - (a) Light Weight Foldable Stretcher:
 - (b) Electrical Hand:
 - (c) Myo-Electric Hand:
 - (d) Solar Battery Charger for Hearing Aid:

- (e) Wheel chair Tabular Folding, Size-II (Based on Dr. Rory A. Cooper Design)
- (f) Body Level Hearing Aid with Tele-Coil Facility:

PSYCHOLOGICAL REHABILITATION

1.38 During evidence, the Committee took up the issue of psychological rehabilitation of the disabled as disability is a psychological injury and trauma also. Thereupon, the representative of the Ministry responded as under:

"We definitely agree that there is need for psychological rehabilitation, specially in cases of accidents. The existing institutions which have been providing these services, for example, the National Institutes which have specialized capability of providing these services, they do build a system of psychological rehabilitation of counseling or supporting them over a longer period of time to prepare them to face Suddenly if somebody's limb is cut, then it is not easily acceptable to anybody. It is a question of time and it definitely requires a longer duration of consultation and counseling and these are being provided by the National Institutes or the Corporations which we have, or by the DDRCs where we have specialized staff who have the requisite training of rehabilitating these kinds of persons and also supporting them over a longer period of time. For the NGOs, we see the kind of network they have, the kind of professional support they have within themselves, or through some outside agency. But still there is no specific component for this scheme. This august Committee has been suggesting and we also feel that it should be possible for us to bring some such component when we go into the next Plan, that is the Eleventh Plan. We will try to bring that factor into it."

AWARENESS GENERATION PROGRAMMES

1.39 The Committee enquired about the number of awareness camps organized by NGOs and other implementing agencies working for the disabled during the financial years 2004-05 and 2005-06, State-wise/UT-wise and also the response of the beneficiaries. The Ministry have stated that holding of assessment and distribution camps for assistive devices itself creates awareness about this scheme. The large number of PWDs who come in these camps clearly demonstrate their positive response for this scheme.

1.40 During evidence, the representative of the Ministry stated:

"The Government organize camps at specific places in various States and the disabled persons who attend the camps are distributed aids and appliances and when the attendance of the disabled persons exceed the availability of the equipments, the names and requirement etc. of such persons are taken note of and equipment to those are provided in the follow up camps".

- 1.41 However, the Committee observed that the number of follow up camps are negligible.
- 1.42 The Ministry have also informed that decision in the Ministry was taken to hold camps for distribution of aids and appliances in uncovered/less covered districts through ALIMCO, National Institutes and DDRCs. For the North Eastern States, ALIMCO was made the nodal agency.

1.43 The Ministry have furnished the following information about the number of camps held for distribution of aids and appliances in uncovered/less covered districts and North Eastern States by ALIMCO, National Institutes and DDRCs separately for the last two years:

I	National Institute	2004-05		2005-06		
(I)	NIHH	2		3		
(ii)	IPH	58		52		
(iii	NIRTAR					
(iv)	NIMH	30		20		
(v)	NIVH	48		41		
(vi)	NIOH	237		202		
sub total		375		318		
II	ALIMCO	489		410		
III	DDRC	421		1141		
Grand Tot	tal (I+II+III)	1285		1869		
	NER		I		1	
	NIOH		13		8	
	ALIMCO		119		214	

1.44 During evidence, the Committee enquired about the details of the number of camps held for distribution of aids and appliances in uncovered/less covered districts and North Eastern States by ALIMCO for the last two years. The Secretary, Ministry of Social Justice and Empowerment stated as under:

"I have some State-wise statistics with me also, but let me mention only the totals. In the year 2004-2005, a total number of 119 camps were organized in the North East, and we spent Rs. 2.53 crore. The number of beneficiaries that we covered in 2004-2005 through these camps in the North East States was 10,132. I also have figures with me for the year 2005-2006. The Ministry had organized 214 camps, which means that there has been an increase in it. This shows the earnestness of the Ministry to address this problem. The number of

beneficiaries covered through these 214 camps is 15,141, and the amount spent only for the North East is Rs. 3.78 crore."

1.45 The Committee also enquired about the number of camps held and beneficiaries covered in North Eastern States by ALIMCO wherein the Ministry furnished the following statement:-

SI.No.	STATE	Total Number of Districts	No. of Districts covered in 2004- 05	Total No. of Camps in 2004- 05	during	Beneficia-	•	Benefi- ciaries in 2005-	No. of Districts covered in 2005- 06	
1	SIKKIM	4	4	9	17.88	715	13	674	4	16.85
2	ASSAM	23	17	79	164.55	6582	154	11091	21	277.28
3	TRIPURA	4	4	13	20.03	801	13	523	4	13.08
4	MANIPUR	9	7	11	35.95	1438	9	828	5	20.70
5	MIZORAM	8	3	3	8.02	321	0	0	0	0
6	ARUNACHAL PRADESH	13	1	1	1.45	58	11	784	5	19.60
7	NAGALAND	8	2	2	4.10	164	3	544	2	13.60
8	MEGHALAYA	7	1	1	1.33	53	11	697	6	17.43
	TOTAL	76	39	119	253.30	10132	214	15141	47	378.53

EVALUATION

1.46 The Ministry have informed the Committee that evaluation study on ADIP scheme has been entrusted to M/s. Santek Consultant Pvt. Ltd., New Delhi in December, 2004. Its report is still awaited. On being asked by what time its report will be given to the Government, the Ministry stated that the matter has been followed up. The report is expected shortly.

MONITORING

- 1.47 The Ministry have informed that monitoring system consist (i) nodal departments of State Governments: Inspection teams/Institutes (ii) designated by the Ministry. It has also been informed that no team of the Ministry has been deputed for inspections during the last three years. The scheme does not provide for any surprise inspections. Also no stipulated date has been provided for carrying out inspections. The Committee desired to know that in the absence of inspections by the officials of the Ministry and surprise inspections by monitoring agencies, how effective monitoring is being done to ensure that funds released are actually utilized for the disabled and the steps taken in this regard, the Ministry in response stated that the responsibility of inspections has been entrusted to the State Governments. There is no bar for the nodal ministry to inspect in case of any complaint and that the ministry supplements the efforts of inspections through the National Institutes. There is an inbuilt provision for test checking of the beneficiaries.
- 1.48 The Committee have also been informed that the Ministry of Social Justice and Empowerment had constituted a Standing Committee for ADIP in April 2003 to ensure utilization of grants under the ADIP Scheme in the widest

possible area, to approve specifications for appliances etc. and their rates, to recommend calendar of camps and for monitoring and inspection of the scheme. This Committee had inter-alia advised the Government as follows:-

- 1. Specifications of appliances in common use to be circulated.
- 2. Spectacles and low vision aids to be included in the ADIP Scheme.
- Availability of infrastructure with agencies conducting more than 50 camps in a year.
- 4. Surprise inspection by monitoring agencies
- 5. To conduct a nation-vide survey on the usage of aids and appliances.

The Standing Committee for ADIP had also received a suggestion that more research is required in the field of aids and appliances and that there is a need for promoting local Institutes in the unserved districts.

1.49 The main objective of the Scheme of 'Assistance to Disabled Persons for Purchase/Fitting of Aids and Appliances' (ADIP) is to assist the needy physically handicapped persons in procuring durable, sophisticated and scientifically manufactured modern and standard aids and appliances, thus alleviating the effects of disability and helping them in their social, economic and psychological rehabilitation. The Committee, however, regret to observe that out of about 22 lakhs disabled persons in the country, only about eight lakh have been benefited under ADIP Scheme so far, which is an abysmally low coverage. The Committee are not happy with this state of affairs as it indicates the lack of dedication and causal approach on the part of the Ministry in handling the core issue of the social, economic and psychological rehabilitation of the handicapped people in the country. The Committee, therefore, recommend that the Ministry should prepare an action plan, in consultation with the implementing agencies of ADIP Scheme, to increase the coverage of beneficiaries so that the persons with disabilities could become more productive, their economic potential enhanced and the quality of their lives improved.

1.50 The Committee are surprised to find that State/UT-wise targets are not fixed under the ADIP scheme by the funded agencies. Also the disability-wise information is not available with the Ministry. The argument put forth by the Ministry that targets are assessed by the number of proposals submitted by implementing agencies and that the progress of the work done by the implementing agencies is monitored

through submission of utilization certificates at the time of release of the second installment is not convincing at all. In the absence of any disability-wise data the Committee feel that the Ministry would not be in a position to fix the targets for the scheme and to monitor its implementation effectively. The Committee, therefore, recommend that the Ministry should take steps to maintain the disability-wise data and also to impress upon the funded agencies to fix State/UT-wise targets under ADIP scheme vigorously so that the implementation of the scheme could be assessed properly.

- 1.51 The Committee note that assistive devices are provided free of cost to persons having income up to Rs. 6,500 per month and at 50 percent concession to persons with income between Rs. 6,501 and Rs. 10,000. The maximum admissible amount for purchase of a device is Rs. 6,000. The benefit of the scheme can be availed of again after a period of three years. Keeping in view the high cost of disability devices due to advancement in technology and rise in price index, the Committee desire that Government should examine the feasibility of increasing the maximum amount fixed for purchase of an assistive device.
- 1.52 The Ministry have disbursed grants in aid of Rs. 55 crore, Rs. 63 crore and Rs. 58 crore to implementing agencies like Artificial Limbs Manufacturing Corporation of India (ALIMCO), National Institutes and NGOs during 2003-04, 2004-05 and 2005-06 respectively. Keeping in view the large number of needy disabled persons the funds allocated for

providing assistive devices to them, are inadequate. The Committee, therefore, recommend that budgetary allocation under ADIP Scheme may be enhanced in accordance with the number of disabled persons in need of assistance so that maximum number of disabled persons could avail the benefits of the scheme.

The Committee further find that the allocation and release of funds under the scheme are not made State/UT-wise, in proportion to the number of persons with disabilities in respective States. Also the information regarding number of beneficiaries covered State/UT wise is not available with the Ministry. The Committee also observe that a large number of persons with various kinds of disabilities have not been benefited so far and some areas like Jammu & Kashmir and North East have been left uncovered. The Committee, therefore, recommend that funds may be allocated State-wise, in proportion to the number of persons with disabilities in respective States and ensure that funds allocated are fully utilized by the implementing agencies and targets achieved. The Committee also desire that number of beneficiaries covered State/UT wise be compiled so that the impact of the scheme could be assessed and regional imbalance in coverage may be rectified.

1.53 The Committee have been given to understand that the ADIP Scheme is mainly implemented by the NGOs as they are very close to the people and have ability to reach and interact directly with the needy groups. However, the Committee find that NGOs are not encouraged by some State Governments particularly in North Eastern States.

Consequently, the Ministry are facing difficulty in implementing the scheme in far flung and remote areas. The Committee, therefore, urge the Ministry to encourage the NGOs to operate in the North Eastern States and in remote/far flung areas by giving them some incentives and by allowing them a substantial role in implementing the scheme with proper accountability so that the benefits could reach the uncovered areas. The Committee also desire that inexperienced NGOs should be provided technical support through National Institutes and District Disability Rehabilitation Centres.

1.54 The Committee have further been informed that District Disability Rehabilitation Centres (DDRCs) are managed through a District Management Team (DMT) and are meant to provide longer counselling, generate awareness and also help in issue of disability certificates. At present 125 DDRCs are working for the disabled persons in the country. However, the Committee find that there are some problems in the DDRCs in terms of manpower availability. The Committee feel that unless such problems are taken care of and DDRCs strengthened with required number of rehabilitation professionals, these Centres would not be able to fulfill their assigned job. The Committee desire that for smooth functioning of DDRCs, their problems in terms of availability of manpower should be taken care of on priority basis so that they could render the desired services for the optimal benefit of disabled persons. The Committee also recommend that District Disabilities Rehabilitation

Centres should be opened in each district to provide counseling, generate awareness and mitigate the problems of disabled persons.

1.55 The Committee also find that States' Welfare Secretaries as well as Commissioners for Disabilities of all States/UTs have been repeatedly requested to promote District Red Cross Societies for implementing the ADIP Scheme in their States. However, the Committee note with surprise that all the States/UTs have not promoted District Red Cross Societies in their respective States so far. Also no proposal has come from North Eastern States for setting up of District Red Cross Societies. The Committee urge upon the Ministry to ascertain the reasons for not promoting the District Red Cross Societies under ADIP Scheme from those States that have not promoted them so far. The Committee also recommend the Ministry to impress upon such State/UT Governments to expeditiously promote District Red Cross Societies in their respective States/UTs, particularly in North East States and far flung areas where no NGO is working so that benefits of the scheme could reach the large number of disabled persons.

1.56 The Committee note that there are seven National Institutes namely National Institute for Mentally Handicapped, Secunderabad; Institute for the Physically Handicapped, Delhi; Ali Yavar Jung National Institute for the Hearing Handicapped, Mumbai; National Institute of Rehabilitation Training and Research, Cuttak; National Institute for the Visually Handicapped, Dehradun; National Institute for Orthopaedically Handicapped, Kolkata and National Institute for Empowerment of

persons with Multiple Disabilities, Chennai in the country for rehabilitation, research, clinical and therapeutic services to the disabled persons. These Institutes are mainly for persons who are suffering from visual. hearing, mental. orthopedic and multiple disabilities. Considering that a large number of persons are suffering from various types of disabilities, the Committee feel that the number of National Institutes is not sufficient to provide services to them to the desired The Committee, therefore, recommend that more National extent. Institutes for disabled persons may be set up in the country. The Committee also recommend that Regional Institutes for various types of disabilities, particularly for the persons suffering from multiple disabilities, may be opened in the States for their benefit.

1.57 ALIMCO is the largest manufacturer of artificial limbs and rehabilitation aids for disabled persons. However, according to the Ministry more research is required in the field of aids and appliances especially by ALIMCO to enhance the comfort and convenience to the users. The Committee, therefore, desire that the ALIMCO and other Research Institutes should be given adequate financial assistance as well as required infrastructure and qualified manpower to take up the task of research in the field of aids and appliances by using advanced technology and to ensure availability of aids and appliance to the beneficiaries at affordable price.

1.58 Disability being a psychological injury and trauma particularly in cases of accidents, there is an urgent need for psychological

rehabilitation of such persons by building a system of counselling and supporting them over a longer period of time to prepare them to face the reality. However, the Committee note with dismay that there is no specific component for psychological rehabilitation under the ADIP scheme. The Committee, therefore, urge upon the Government that this particular aspect of psychological rehabilitation of disabled persons should also be given priority and included in the scheme at the earliest.

1.59 The Committee note that the implementing agencies of ADIP scheme organize camps in various parts of the country for distributing assistive devices among the disabled persons. During the year 2004-05, the National Institutes and ALIMCO held 375 and 489 camps whereas in 2005-06 there were 318 and 410 respectively. However, the Ministry have no information about the number of camps held Statewise. Also no separate camps were organized to generate awareness among the disabled persons for using artificial limbs and appliances. Further, follow up camps to distribute equipments to the left over disabled persons are seldom organized and that in the North East States coverage is very poor as only 39 districts in 2004-05 and 47 districts in 2005-06 were covered out of the total 76 districts. Keeping in view the importance of the scheme, the Committee desire that it should be given publicity more extensively and vigorously through both print and electronic media like TV/Radio Channels, in vernacular print media, and by distribution of pamphlets etc. The Committee, also recommend

that the implementing agencies of the scheme should organize more camps specifically for generating awareness regularly and distribute aids and appliances to all the needy persons particularly in remote and inaccessible areas with special thrust on uncovered/less covered areas/districts. Follow up camps should also be organized invariably so that the persons who could not get the assistive devices in the camps organized earlier, could be provided with such equipments as per their needs.

- 1.60 The Committee find that the evaluation study on ADIP Scheme has been entrusted to M/s Santek Consultant Pvt. Ltd., New Delhi in December, 2004. However, their Report is still awaited. The Committee desire that the Government should emphasize upon M/s Santek Consultant Pvt. Ltd., to expedite the submission of the evaluation Report to the Government so that necessary remedial measures could be taken by them.
- 1.61 The Committee are constrained to note that the Ministry have not deputed any official/team for inspections in recent years. Also no target date has been provided for carrying out inspections. The Committee feel that in the absence of inspections by the Ministry and the monitoring agencies, effective implementation of the scheme can not be ensured. The reason given by the Ministry that the responsibility of inspections has been entrusted to the State Governments is not convincing at all as it is for the nodal Ministry to ensure effective implementation of the scheme. The Committee, therefore, recommend

that a Monitoring Committee may be set up in the Ministry to ensure regular and strict monitoring of the implementation of ADIP scheme in a concerted and focused manner. The Ministry should also strengthen its monitoring mechanism and send the inspection teams periodically to monitor the implementation of the scheme particularly in North-Eastern States.

1.62 The Committee find that the Government had constituted a Standing committee for ADIP in April, 2003. The Committee had made some suggestions which included circulating the specifications of appliances in common use, inclusion of spectacles and low vision aid under the ADIP scheme, ensuring availability of infrastructure with agencies conducting more than 50 camps in a year, surprise inspection by monitoring agencies, conducting a nation wide survey on usage of aids and appliances, strengthening of research and development of appliances and promotion of local institutes in unserved districts. The Committee feel sad to note that they have not been intimated about the action taken by the Government on the recommendations of the Standing Committee on ADIP, set up in 2003, so far. The Committee, therefore. desire the Government to implement the recommendations/suggestions of the Standing Committee on ADIP sincerely and apprise the Committee of the precise action taken thereon at the earliest.

NEW DELHI;	
	2007
	1929 (Saka)

Smt. SUMITRA MAHAJAN, Chairperson, Standing Committee on Social Justice and Empowerment

ANNEXURE-I

Number of Beneficiaries covered under ADIP Scheme										
SI.No.	Name of State/UT	2001-02	2002-03	2003-04	2004-05	2005-06				
1.	Andhra Pradesh	20187	13960	25044	29860	22300				
2.	Arunanchal Pradesh	253	40	72	0	125				
3.	Assam	130	423	0	56	410				
4.	Bihar	5823	9054	1440	2050	6400				
5.	Chhatisgarh	879	1928	1552	2800	640				
6.	Goa	210	405	65	20	0				
7.	Gujarat	13366	26077	9500	6615	9700				
8.	Haryana	8039	9311	2207	4006	4900				
9.	Himachal Pradesh	487	1846	280	354	500				
10.	Jammu & Kashmir	172	1848	0	0	200				
11.	Jharkhand	618	237	600	175	0				
12.	Karnataka	5739	9250	3990	441	3200				
13.	Kerala	3321	6253	750	159	345				
14.	Madhya Pradesh	14765	27732	900	1111	4000				
15.	Maharashtra	10673	11212	13250	21967	21250				
16.	Manipur	8	12	0	0	0				
17.	Meghalaya	0	0	0	0	0				
18.	Mizoram	188	203	1350	25	0				
19.	Nagaland	503	13	0	0	0				
20.	Orissa	7087	8731	9950	18851	7100				
21.	Punjab	3391	8260	1800	1697	2150				
22.	Rajasthan	28949	37051	25500	24300	34500				
23.	Sikkim	560	468	0	0	0				
24.	Tamil Nadu	6030	13398	5446	4370	7550				
25.	Tripura	156	294	150	340	0				
26.	Uttar Pradesh	51287	46481	79750	118009	133200				
27.	Uttaranchal	6518	7286	15400	11095	400				
28.	West Bengal	13098	22218	8782	11307	17200				
29.	A.& N. Islands	0	0	0	0	0				
30.	Chandigarh	0	0	0	0	0				

31.	Dadra & Nagar Haveli	0	0	0	0	0
32.	Daman & Diu	0	0	0	0	210
33.	Delhi	10502	10458	30500	19425	24100
34.	Lakshdweep	0	0	0	0	0
35.	Pondicherry	0	0	0	0	0
	TOTAL	212939	274449	238278	281033	300380

Annexure - II

	List of 12	25 function	al DDRCs
S.No.	State	S.NO.	Name of the DDRC
1	Andman And Nicorbar	1	Portblair
	Andhra Pradesh	2	Anantpur
		3	Vishakapatnam
		4	Karimnagar
2	Bihar	5	Gaya
		6	Darbhanga
		7	Kishnaganj
		8	Banka
		9	Chapra
		10	Muzafarpur
		11	Nawada
		12	Jehanabad
		13	Smastipur
3	Chhattisgarh	14	Rajpur
		15	Raigarh
		16	Durg
		17	Jashpur
		18	Bastar
4	Dadar and Nagar Haveli	19	Silvasa
5	Daman and Diu	20	Diu
6	Goa	21	Panji
7	Gujarat	22	Jamnagar
		23	Surat
		24	Vadodara
		25	Ahmedabad
		26	Rajkot
		27	Bhavnagar
		28	Junagarh
		29	Nadiad
8	Haryana	30	Kurukshetra
	-	31	Sonepat
		32	Rohtak
		33	Hissar
9	Himachal Pradesh	34	Dharamsala

		35	Shimla
10	Jharkhand	36	Ranchi
10	Juai Kuanu	37	Hazaribag
		38	Jamshedpur
		39	Dumka
11	Karnataka		
11	Кагпацака	40	Bellary
		41	Belgaum
		42	Mangalore Tumkur
		43	
		44	Gulbarga
10	T7 1	45	Manday
12	Kerala	46	Thiruvananathapuram
		47	Kozhikode
	25 11 22 11	48	Thrissure
13	Madhya Pradesh	49	Rewa
		50	Balaghat
		51	Indore
		52	Gwalior
		53	Jhabua
		54	Rajgarh
		55	Sagar
		56	Ujjain
		57	Alote
		58	Khargaon
		59	Mandsaur
		60	Dewas
		61	Satna
		62	Jawad
		63	Agar
		64	Damoh
14	Maharashtra	65	Wardha
		66	Latur
		67	Kolhapur
		68	Buldana
		69	Aurangabad
		70	Sindhudurg
		71	Dadar/Mahim
15	NE Arunachal Pradesh	72	Itanagar
16	NE Assam	73	Tezpur
		74	Dibrugarh
		75	Silchar

17	NE Jammu and Kashmir	76	Udhampur
		77	Anantnag
		78	Leh
18	NE Manipur	79	Imphal
19	NE Megahalaya		Shillong
20	NE Mizoram	80	Aizwal
		81	Lunglei + Lunglit
		82	Kolasib + Mamit
21	NE Nagaland	83	Dimapur
22	NE Sikkim	84	Gangtok
23	NE Tripura	85	Agartala
24	Orissa	86	Phulbani
		87	Sambalpur
		88	Mayurbhanj
		89	Kalahandi
		90	Korput
		91	Ganjam
25	Pondichery	92	Pondichery
26	Punjab	93	Sangrur
		94	Patiala
		95	Ferozepur
		96	Bhatinda
27	Rajasthan	97	Jodhpur
		98	Bikaner
		99	Jhunjhunu
		100	Udaipur
28	Tamil Nadu	101	Vellore
		102	Madurai
		103	Thoothukudi
		104	Salem
		105	Virudhunagar
		106	Kanyakumari
29	Uttar Pradesh	107	Gorakpur
		108	Mau
		109	Gonda
		110	Varanasi
		111	Agra
		112	Meerut
		113	Allahabad
		114	Balia
		115	Pilibhit

		116	Jhansi
		117	Farrukhabad
		118	Ambedkar Nagar
30	Uttaranchal	119	Tehri Garwah
		120	Haridwar
		121	Almorah
31	West Bengal	122	Jalpaigudi
		123	Murshidabad
		124	dakshin Dinajpur
		125	24 Parganas North

ANNEXURE -III

State wise NGO, ALIMCO/NIs wise funds released during 2004-05 and 2005-06 (Rs. in lakhs) S.NO. 2005-06 State District Name of the Implementing 2004-05 Agencies Aditya Industrial Educational 3.00 1 ANDHRA Warangal 4.88 Society, H.NO.2-42, Shivunipally, PRADESH Ghanpur Station -506143Warangal 2 Comprehansive Action for Rural 12.50 ANDHRA Krishna 12.50 PRADESH Development Society, Patha Ravicherla, Nuzvid, Krishna Distt., Pin-521201 3 ANDHRA Medak District Rural Development 0.00 10.00 PRADESH Agency, Medak 4 ANDHRA DRC Vijaywada 30.00 Vijaywads 29.80 PRADESH 5 ANDHRA Vishakhapatnam DRDA, Vishakhapatnam 20.00 0.00 PRADESH 6 ANDHRA Vishakhapatnam Free Polio Surgical & Research 0.00 150.00 PRADESH Foundation, D.No.14-3-18, Maharanipeta, Visakhapatnam, Pin-530002 7 ANDHRA Guntur Leprosy Rehabilitation Project. 0.92 10.00 PRADESH Near Railway overbridge, Mangalgiri-522003, Guntur 8 ANDHRA Secundrabad Lions Club of Secundrabad 5.00 0.00 PRADESH Charitable Trust Motilal Gajara Bai Patnyl Free Artifical Limbs Centre , 10-1-254 , West Marredpally ,Secundrabad 9 ANDHRA Secundrabad National Institute for the Mentally 500.00 70.00 PRADESH Handicapped, Manov Vikas Nagar P.O., Secunderabad-500009 10 ANDHRA Chittoor People's Action for Social 3.00 3.00 PRADESH Service, 10-12, Maruti Nagar, Tirupati-517502, Chittoor District. 11 ANDHRA Chittoor Rashtriya Seva Samiti, 9, Old 3.73 7.50 Huzur office Buildings, Tirupati-PRADESH 517501, Chittoor Distt. 12 ANDHRA 10.00 10.00 Krishna Ravicherla Integrated Development & Education PRADESH Society, Ravicherla, Nuzvid-

521201, Krishna District.

13	ANDHRA PRADESH	Khammam	Rotarians Community Service Foundation , Rotary Complex, Opp. Sub Court , Kothagudem - 507 101	5.50	5.58
14	ANDHRA PRADESH	Khammam	Rotary Artificial Limb Centre , Q.NoB-2, N.S.P. Road , Khammam-507001, Andhra Pradesh	0.00	5.00
15	ANDHRA PRADESH	Prakasam	S.K.R.Pupils Welfare Society, Behind A.P.S.R.T.C. Bus Station, Chimakurthy-523226 , Prakasam	4.76	7.50
16	ANDHRA PRADESH	Warangal	Seva Sahakar Welfare Organisation, 2-10790/14, Opp. Reddy Hostel Lane,Waddepally 'X' Roads, Subedari, Hanamkonda - 605001 Warangal	3.00	5.00
17	ANDHRA PRADESH	Medak	Society for Promotion of Rural Development ,H.No.22-242, Opp. Raghava Apts. Bhagya Colony, Kukatpally	4.28	7.00
18	ANDHRA PRADESH	Secundrabad	Sweekar Rehabilitation Institute for Handicapped, Upkar complex, Upkar Junction, Secunderabad-3.	6.00	0.00
19	ANDHRA PRADESH	East Godavari	Uma Educational & Technical Society, Manovikas Nagar, Behind Rayudupalem, Kakinada- 533005, East Godavari District	12.00	12.00
20	ANDHRA PRADESH	Secundrabad	Upkar Dr.P.N.Hanumantha Rao Charitable Trust, Upkar circle, Picket, Secunderabad-500003	15.00	7.50
21	ANDHRA PRADESH	Prakasam	Vutukuri Venkata Subbamma Welfare Society, Kotla Bazar, Chirala-523155, Prakasam District	6.00	9.00
22	ANDHRA PRADESH	Anantpur	Women's Development Trust	0.00	10.00
23	ARUNACHAL PRADESH	Itanagar	R.K. Mission Hospital, P.OR.K. Mission, Itanagar-791113.	0.00	3.00
24	ASSAM	Guwahati	Directorate of Social Welfare , Government of Assam , Secretariat	1.19	0.00
25	ASSAM	Barpeta	Ujala Society	0.00	10.00
26	BIHAR	Patna	Bihar Rehabilitation & Welfare Institute, G-4, People's Co- operative colony, Kankerbagh, Patna-800016	7.50	50.00

27	BIHAR	Patna	J.M.Institute of Speech & Hearing, Indrapuri, P.OKeshari Nagar, Patna-800024	5.00	7.00
28	BIHAR	Saharsa	Koshi Kshetriya Viklang, Vidhwa, Vridha Kalyan Samiti, Katra Ward No.4, Bangown Road, Saharasa	8.00	0.00
29	BIHAR	Patna	Magadh Rehabilitation & Welfare Society, A/9, P.C. Colony, Markarbagh, Patna-20	5.00	10.00
30	BIHAR	Patna	Physical Medicine & Rehabilitation Institute, Rajendra Nagar, Road No.6-B, Patna- 800016	15.00	15.00
31	BIHAR	Patna	Yoga Nature Cure and Health Care Foundation, Stall Room No24, Ground Floor, Shiv Apartment, Opp. Gayatri Mandir, Kankarbagh, Patna-800020, Bihar	4.00	7.00
32	CHATISGARH	Bilaspur	District Rehabilitation Centre , Bilaspur	29.08	0.00
33	CHATISGARH	Dhamtari	District Rural Development Agency , Dhamtarai , Zila Panchayat (DRDA) Dhamtari	0.00	5.00
34	CHATISGARH	Surguja	Gyanodaya Association, Beside Co-operative Bank, Bishrampur, Surguja- 497 226, Chhatisgarh	10.00	0.00
35	CHATISGARH	Raigarh	Indian Red Cross Society ,Raigarh , District Hospital Campus , Raigarh -496001, Chhatisgarh	0.00	10.00
36	CHATISGARH	Bilaspur	Zilla Panchayat (DRDA) – Bilaspur, Distt Bilaspur, Chhatisgarh	24.63	0.00
37	DELHI	Delhi	Akhil Bharatiya Viklang, Vidhwa, Vridha Sewa Samiti, Viklang Sahayata Kendra, D-3 Block, Near Railway Quarters, Nand Nagari, Delhi-110093	1.50	1.50
38	DELHI	Delhi	Akshay Pratisthan, D-III, Vasant Kunj, New Delhi-11007-	12.00	12.00
39	DELHI	Delhi	All India Federation of the Deaf, 18, Northend Complex, Sri Ramakrishna Ashram Marg, New Delhi-110001	1.24	0.00
40	DELHI	Delhi	Amarjyoti Charitable Trust, Karkardooma, Vikas Marg, Delhi-110092	32.00	36.00

41	DELHI	Delhi	Delhi Bharat Vikas Foundation, Viklang Sahayata Kendra, Near Sri Radha Krishna Mandir, Dilshad Garden, Delhi-110095	15.00	7.50
42	DELHI	Delhi	District Rehabilitation Centre, IPH Building, New Delhi	39.35	0.00
43	DELHI	Delhi	Dr. Zakir Hussain Memorial Trust, 4, Gulmohar Avenue, Jamia Nagar, New Delhi	30.00	45.00
44	DELHI	Delhi	Handicapped Welfare Federation, HWF Bhawan , Madhur Vihar, I.P.Extension, Delhi -110092	2.00	0.00
45	DELHI	Delhi	Indian Spinal Injuries Centre, Sector-C, Vasant Kunj, New Delhi-110070	10.00	0.00
46	DELHI	Delhi	Institute for the Physically Handicapped, 4, Vishnu Digamber Marg, New Delhi	225.00	337.00
47	DELHI	Delhi	Jyoti Manav Seva Sansthan, Nangli Dairy colony, Najafgarh, New Delhi-110043	3.00	0.00
48	DELHI	Delhi	Ortho Prosthetics Care & Rehabilitation, 66-A, Street No.2, Krishna Nagar, Safderjung Enclave, New Delhi	10.00	5.00
49	DELHI	Delhi	Society for Polio Surgery & Care for Disabled, D-124, Ashok Vihar, New Delhi	20.00	25.00
50	DELHI	Delhi	St.Stephen Hospital, Tis Hazari, Delhi	10.81	0.00
51	DIU & DAMAN	Diu	The Society for Welfare of Mentally Retarded Children , Pavi Kuwa Ghoghta , Diu(Ut)- 362540	0.00	5.00
52	GOA	Panaji	Caritas-Goa, Paco Patriarcal, Altinho, Panaji-403001	0.40	0.00
53	GUJARAT	Ahmedabad	Andh Apang Kalyan Kendra, Jantanagar Road, Ghatlodia, Ahmedabad-380061	5.00	10.00
54	GUJARAT	Ahmedabad	Bharat Vikas Parishad Viklang Kendra, 22, Lower Level, Jaydeep Tower, Nr. Shreyash Rly. Crossing, Vasana, Ahmedabad- 380007, Gujarat.	0.00	0.00
55	GUJARAT	Ahmedabad	Blind People's Association, Dr.Vikram Sarabhai Road, Vastrapur, Ahmedabad-380015	75.00	102.00
56	GUJARAT	Ahmedabad	Indian Red Cross Society ,Gujarat State Branch , Juna Wadaj , Near Wadai Bus Stop , Ashram Road , Ahmedabad	0.00	13.00

57	GUJARAT	Rajkot	Jilla Apang Punarvasan Kendra , Pandit Deen Dayal Upadhyay Civil Hospital , Old Emergency Ward, Rajkot-360001, Gujarat	0.00	10.00
58	GUJARAT	Surat	Jilla Apang Punarvasan Kendra , Radiology Department , New Civil Hospital , Majuraget,Surat- 395001 , Gujarat	0.00	10.00
59	GUJARAT	Jamnagar	Jilla Apang Punarvasan Kendra, Guru Gobind singh Hospital , Nr. Radiology Department, Jamnagar -368001	0.00	10.00
60	GUJARAT	Vadodra	Medical Care Centre Trust, K.G.Patel Children Hospital, Jalaram Marg, Karelibang, Vadodra-390018	10.00	0.00
61	GUJARAT	Surendranagar	Ratnanidhi Charitable Trust , Vivekanand Society No.4 , Bunglow -18, New Junction Road , Surendranagar -363001, Gujarat	0.00	30.00
62	GUJARAT	Kutch	Shree Beedada Sarvodaya Trust, Kutch ,Shah Kalyanji Patel Arogyadham Hospital, Vill- Bidada, Taluk-Mandvi-370435 Gujarat	10.00	0.00
63	GUJARAT	Bhavnagar	Smt. PNRS Society for Relief & Rehabilitation of Disabled, 51, Vidya Nagar, Bhavnagar-364002	30.00	0.00
64	GUJARAT	Mehsana	Uttar Gujarat Viklang Kalyan Sangh, Plot No9 , Dagala , Opp Jawahar Society , Visnagar ,Mehsana	0.00	0.00
65	GUJARAT	Vadodra	V-One Society, Bhumija Complex, Opposite Mission Training Compound, Fatehgunj, Baroda-390002	15.00	15.00
66	HARYANA	Bhiwani	District Rehabilitation Centre- Bhiwani, First Floor, Laundry Road, Central Hospital, Bhiwani- 127021	39.91	0.00
67	HARYANA	Chandigarh	Haryana Saket Council, Saket Institute for the Orthopaedically Handicapped, Chandi Mandir- 134107	0.00	0.00
68	HARYANA	Sonepat	Indian Red Cross Society , District Branch , Sonepat, Red Cross Bhavan , Sonepat- 124103.	0.00	10.00
69	HARYANA	Jhajjar	Indian Red Cross Society, District Branch Jhajjar, Jhajjar- 124103	14.98	15.00

70	HARYANA	Faridabad	IRCS, District Branch Faridabad, Red Cross Bhawan, Sector-12, Faridabad, Haryana	11.52	0.00
71	HARYANA	Karnal	IRCS, District Branch Karnal, Karnal, Haryana.	0.00	7.16
72	HARYANA	Rohtak	IRCS, District Branch Rohtak, Red Cross Bhawan, Rohtak-124 001, Haryana.	7.50	14.00
73	HARYANA	Yamunanagar	IRCS, District Branch Yamunanagar, Yamunanagar- 135 001, Haryana.	12.66	12.00
74	HIMACHAL PRADESH	Kangra	Bharat Vikas Parishad, Viklang Punervas Sansthan, Nagrota Bhavanm, Udyog Nagar, Kangra-1760047	1.25	0.00
75	HIMACHAL PRADESH	Dharamshala	Indian Red Cross Society, Kangra District Branch	0.00	7.00
76	HIMACHAL PRADESH	Solan	Viklang OPCAR Kendra, Thakur Road, Rajpura, The Nalagarh, Distt Solan, Himanchal Pradesh	6.50	5.00
77	JAMMU 8 KASHMIR	Jammu	Panch Karma & Herbal Research Kendra - 257,A, Shastri Nagar , Jammu- 180004, Jammu & Kashir	0.00	5.00
78	JHARKHAND	Ranchi	Mukti Sansthan, Albert Compound, Purulia Road, Ranchi-834001, Jharkhand	4.00	0.00
79	KARNATAKA	Mysore	All India Institute of Speech & Hearing, Manasgangotri, Mysore-570006	50.00	48.72
80	KARNATAKA	Bangalore	Anga Karunya Kendra, No15, Visheshwaraiah Industrial Area , Mahadevapura Post, Bangalore- 560052	3.00	0.00
81	KARNATAKA	Mysore	District Rehabilitation Centre, Mysore, Pulikeshi Road, Tilaknagar, Mysore-570021	23.96	6.23
82	KARNATAKA	Belgaum	Indian Red Cross Society, Belgaum	0.00	10.00
83	KARNATAKA	Mysore	J.S.S. Hospital, Ramanuja Road, Mysore-570004	8.00	0.00
84	KARNATAKA	Bangalore	Mobility India, 1 st &1 st 'A' Cross, J.P. Nagar, 2 nd Phase, Bangalore- 560078, Karnataka	0.00	3.75
85	KARNATAKA	Mysore	Rotary Mysore Mahaveer Artificial Limb Centre, 119D, 14/A, New Sayyaji Rao, Bamboo Bazar, Mysore-570021	2.00	0.00

86	KARNATAKA	Davangere	Sri Vinayak Education Society	0.00	5.00
87	KARNATAKA	Bellary	Vishwa Bharathi Kalaniketan & Education Society , Ennoble House, Raghevachari Road, Bellary, Karnatak -583101.	8.41	0.00
88	KERALA	Calicur	Association for Welfare of the Handicapped, P.O.No.59, 17/194 A, M'Square complex, Pavamani Road, Calicut-673001	1.08	0.00
89	KERALA	Kozhikode	Department of Physical Medicine and Rehabilitation, Medical College Thrissur for DDRC Kozhikode	7.00	0.00
90	KERALA	Thrissur	Government Medical College Hospital , Thrissur	10.00	0.00
91	KERALA	Thiruvanthapuram	National Institute of Speech & Hearing, Palace Road, Poojappura, Trivandrum-695012	14.00	0.00
92	KERALA	Thrissur	Tropical Health Foundation of India, Guruvayoor Road, Arthat P.O., Kunnamkulam-680521, Thrissur	3.00	8.00
93	MADHYA PRADESH	Barwani	Asha Gram Trust, P.O. Barwani, DisttBarwani	15.00	15.00
94	MADHYA PRADESH	Jhabua	Indian Red Cross Society, Jhabua	0.00	10.00
95	MADHYA PRADESH	Rajgarh	Indian Red Cross Society, Rajgarh	0.00	10.00
96	MADHYA PRADESH	Indore	Kritrim Aung Kendra, Scheme No.56, Sector-2, A.B.Road, Indore-452010	0.00	10.00
97	MADHYA PRADESH	Indore	M.P. Welfare Association for the Blind, 33, B/D, Kila Maidan, Indore-452006	3.00	0.00
98	MADHYA PRADESH	Gwaloir	Shourya Pratap Shiksha and Samaj Kalyan Samiti	0.00	10.00
99	MADHYA PRADESH	Indore	Welfare Association for the Disabled for DDRC Indore	0.00	10.00
100	MADHYA PRADESH	Indore	Welfare Association for the Disabled, 8, Ram Baug, Indore- 452004	5.00	0.00
101	MAHARASHTRA	Mumbai	Ali Yavar Jung National Institute for the Hearing Handicapped, K.C.Marg, Bandra Reclamation, Bandra, Mumbai-400050	405.00	300.00
102	MAHARASHTRA	Amravati	Apang Jeevan Vikas Sanstha, Bhumiputra colony, Near Congress Nagar, Amravati	8.00	10.00
103	MAHARASHTRA	Ahmednagar	Arunoday Bahuuddeshiy Gramin Vikas Sanstha , Ahmednagar	5.00	7.00

104	MAHARASHTRA	Pune	Ayodhya Charitable Trust, S.No.51/2, Near S.R.P. Gate No.2, Vikas Nagar, Wanawadi Village, Pune-411040	9.00	5.00
105	MAHARASHTRA	Thane	DRC- Virar, Karadi Naka Bolinj, Virar (w), The Vasai, Distt. – Thane, Maharashtra	30.00	0.00
106	MAHARASHTRA	Latur	Jeevan Vikas Pratishthan for DDRC Latur	10.00	0.00
107	MAHARASHTRA	Wardha	Kasturba Health Society	0.00	8.00
108	MAHARASHTRA	Nashik	National Association for the Blind, Yashwant mandai, 3 rd Floor, Raviwar Karanja, Nashik- 422001	2.78	0.00
109	MAHARASHTRA	Jalna	Pratishthan Shikshan Prasarak Mandad , Navin Nathnagar , Ambad District , Jalna , Maharashtra	0.00	4.00
110	MAHARASHTRA	Ahmednagar	Sahaj Foundation	0.00	10.00
111	MAHARASHTRA	Aurangabad	Shradha Mahila Mandal	0.00	5.00
112	MAHARASHTRA	Nagpur	Uddhar, Rajaramka Bhawan, Gokulpeth, Nagpur-10.	0.00	2.30
113	MIZORAM	Lawngtlai	District Rural Development Agency - Lawngtlai	5.00	0.00
114	ORISSA	Koraput	ALOK for DDRC Koraput	9.00	0.00
115	ORISSA	Bhadrak	Centre for Rehabilitation Services & Reserch, AT- Erein, PO- Charmpa, Distt Bhadrak- 756101	29.97	29.96
116	ORISSA	Kalahandi	Indian Red Cross Society, District Branch Kalahandi	0.00	10.00
117	ORISSA	Mayurbhanj	Jilla Swathya Samiti (ZSS)	0.00	10.00
118	ORISSA	Cuttack	National Institute of Rehabilitation Training & Research, Olatpur, P.O.Bairoi, Cuttack	365.00	0.00
119	ORISSA	Puri	Nilachal Seva Pratisthan, Daya Vihar (Kanas), DisttPuri-752017	4.00	0.00
120	ORISSA	Bhubneshwar	Orissa Multipurpose Development Centre, 4/14, MIG- II, BDA colony, Chandrasekharpur, Bhubaneswar-16	1.00	2.32
121	ORISSA	Sambalpur	R.J. Orthopaedics, At- Netaji chowk, PO- Burla, Distt Sambalpur	1.24	5.00

122	ORISSA	Rourkela	Regional Rehabilitation & Artificial Limb Centre, Near RGH, Panposh Road, Rourkela- 769 004	9.99	11.99
123	PUNJAB	Ludhiana	Bharat Vikas Parishad Charitable Trust, Punjab, P.OViklang Sahayata Kendra, C-Block, Rishi Nagar, Ludhiana-141001	2.50	0.00
124	PUNJAB	Ludhiana	Guru Nanak Charitable Trust, Gurmat Bhawan, Merneck Nagar, Mullarpur Mandi, Distt Ludhiana	6.87	7.00
125	PUNJAB	Bhatinda	Helping Hand Educational Society, H.H.Orthotics & Prothetics Centre, Opp.D.A.V. School, St. No.10, Bibi Wala Road, Bhatinda	6.55	8.00
126	PUNJAB	Faridkot	Indian Red Cross Society, District Branch Faridkot, Red Cross Bhawan, Sadiq Road, Faridkot-151203	15.30	0.00
127	PUNJAB	Ferozepur	Indian Red Cross Society, District Branch Ferozepur	0.00	10.00
128	PUNJAB	Patiala	Indian Red Cross Society, District Branch Patiala	0.00	10.00
129	PUNJAB	Amritsar	IRCS, District Branch Amritsar, Amritsar, Punjab	6.45	0.00
130	PUNJAB	Hoshiarpur	IRCS, District Branch Hoshiarpur, Hoshiarpur, Punjab	0.00	5.00
131	RAJASTHAN	Jaipur	Bhagwan Mahaveer Viklang Sahayata Samiti, Sawai Mansingh Hospital, Jaipur	400.00	500.00
132	RAJASTHAN	Sriganganagar	Khatri Artificial Limbs Charitable Trust	0.00	5.00
133	RAJASTHAN	Udaipur	Narayan Sewa Sansthan, Sewadham, 483, Hiran Magri, Sector-4, Udaipur-313002	225.00	300.00
134	RAJASTHAN	Jhunjhunu	Sewa Jyoti (R.R.Morarka Charitable Trust)	0.00	10.00
135	TAMIL NADU	Chennai	Akshaya, 172, Luz Church Road, Chennai- 600 004, T. Nadu	2.87	0.00
136	TAMIL NADU	Cuddalore	Centre for Rural Education & Economic Development, P.B.No.9,18, Siva Nagar (Near Bus stand-Chinna Market) Chidambaram-608001, Cuddalore	6.25	6.25

137	TAMIL NADU	Chennai	Christian Foundation for the Blind, C.F.B.I. Services Complex, 2, Officer's Lane, G.S.T.Road, Pallavaram, Chennai-600043	1.50	3.00
138	TAMIL NADU	Chengalpattu	District Rehabilitation Centre- Chengalpattu, GST Road, Near Court, Chengalpattu-603001	9.68	20.18
139	TAMIL NADU	Chennai	Flowers Rural Poor Development Charitable & Educational Trust, No.5/101, Defence colony Road, Thangam complex, Butt Road, Chennai-600016	0.00	4.50
140	TAMIL NADU	Chennai	German Leprosy Relief Association Rehabilitation Fund, 4, Gajapathy street, Shenoynagar, Chennai-600030	1.24	0.00
141	TAMIL NADU	Nagaipattinam	Gramiya Social Welfare Society, 35, Railway Street, Malliyam- 609 806, Mayiladuthurai- Taluk, Nagapattinam District, T. Nadu	2.50	0.00
142	TAMIL NADU	Chennai	Helping Poor Association , Chennai	5.00	0.00
143	TAMIL NADU	Chennai	Hindu Mission Hospital	0.00	5.00
144	TAMIL NADU	Madurai	Indian Association for the Blind, Alagarkoil Main Road, Sunderajanpatti, Arumbanoor Post, Madhurai-625104	11.58	13.42
145	TAMIL NADU	Chennai	Indian Red Cross Society, Tamil Nadu State Branch, No.50, Montieth Road, Egmore, Chennai-600008	8.50	0.00
146	TAMIL NADU	Cuddalore	Madhar Nala Thondu Niruvanam , Thiruvendhipuram Main Road , Pathirikupam & PO Cuddalore - 607401	2.18	0.00
147	TAMIL NADU	Madurai	MANSA - District Mentally Disabled Welfare Agency	0.00	10.00
148	TAMIL NADU	Cuddalore	Oasis Trust for the Handicapped, P.B. No- 61, Yadava Street (Extn.), Vanniyarapalayam, Cuddalore- 607 001, Cuddalore District, T. Nadu	5.00	10.00
149	TAMIL NADU	Salem	R.B.Charitable Trust, 206-B, Second Agraharam, Salam- 636001	8.00	7.50

150	TAMIL NADU	Madurai	S.M.Rehabilitation Trust, 1-C, 2.00 Middle street, Madichiam, Madurai-625020		4.00
151	TAMIL NADU	Thanjavur	Sacred Heart Leprosy Centre, Karaikal Road, Sakkottai- 612401, Kumbakonam R.S.	5.00	6.93
152	TAMIL NADU	Chennai	Shakti Nature Cure & Research Centre	0.00	4.13
153	TAMIL NADU	Chennai	The Spastics Society of Tamil Nadu, Opposite T.T.T.I., Taramani, Chennai-600113	7.00	7.00
154	TAMIL NADU	Tiruchirapalli	Tiruchirapalli Multipurpose Social Service Society, P.B.No.12, Melapudur, Tiruchirapalli-620001	14.00	22.58
155	TAMIL NADU	Thoothukudi	V.O.C.Educational Society	0.00	10.00
156	TRIPURA	West Tripura District	District Rural Development Agency , West Tripura	7.08	0.00
157	UTTAR PRADESH	Bijnor	Apang Asahay Jan Vikas Sansthan, Village - Musepur, PO- Mandawali, District Bijnor, U.P.	6.00	8.00
158	UTTAR PRADESH	Kanpur	Artificial Limbs Manufacturing Corporation of India, G.T.Road, Kanpur.	2426.50	2427.00
159	UTTAR PRADESH	Ghaziabad	Bhagirath Sewa Sansthan	2.50	4.00
160	UTTAR PRADESH	Kanpur	Bhartiya Viklang Kalyan Samiti	0.00	4.50
161	UTTAR PRADESH	Varanasi	Chitragupt Shikshan Sansthan, Vill & P.OSakalpur, Varanasi	6.50	9.00
162	UTTAR PRADESH	Sitapur	District Rehabilitation Centre, Sitapur.	34.19	9.73
163	UTTAR PRADESH	Gonda	District Rural Development Agency	0.00	10.00
164	UTTAR PRADESH	Maharajganj	Dr. Ambedkar Shikshan sansthan, Village- Basahia Khurd, PO- Partawal Bazar, Distt Maharajganj.	5.00	2.50
165	UTTAR PRADESH	Muzaffarnagar	Dr. B.R.Ambedkar Jan Seva Samiti, Vill-Puttha, P.OKhatouli, Distt.Muzaffarnagar	4.00	10.00
166	UTTAR PRADESH	Sultanpur	DRC- Jagadishpur, Community Health Centre Campus, Jagdishpur, Sultanpur-227 809, UP	25.00	0.00
167	UTTAR PRADESH	Siddharthnagar	Gram Vikas Sansthan, Deepak Niwas , Jamdih Pandey , Mahso Road , Post Labnapar , District Basti , U.P.	5.00	5.00

168	UTTAR PRADESH	Mau	Indian Red Cross Society , Mau	0.00	10.00
169	UTTAR PRADESH	Allahabad	Indian Red Cross Society, District Branch Allahabad, 53, Bahadurganj, Allahabad	10.00	5.00
170	UTTAR PRADESH	Gorakhpur	Indian Red Cross Society, 0.0 District Branch Gorakhpur		10.00
171	UTTAR PRADESH	Lucknow	Indian Red Cross Society, U.P.State Branch	0.00	61.00
172	UTTAR PRADESH	Sultanpur	Janaki Gramothan Mahila Bal Vikas Sansthan, Village-Poore Devidutt, Dakhinwara, Krishnanagar, P.OGoriabad, DisttSultanpur	3.00	6.00
173	UTTAR PRADESH	Gorakhpur	Janjeevan Madhyamik Shiksha Samiti	3.00	6.00
174	UTTAR PRADESH	Mathura	Kalyanam Karoti, Kalyan Dham, Saraswati Kund. Masani, Mathura-281003	16.00	16.00
175	UTTAR PRADESH	Lucknow	Lohia Public School Samiti, 3, Patel Nagar, Star colony, Indira Nagar Extension, Lucknow- 226016	7.50	10.00
176	UTTAR PRADESH	Mau	Lohia Samaj Seva Sansthan	3.00	5.00
177	UTTAR PRADESH	Sultanpur	Madhyamik Vidyalaya Purab Gaon Saresar Sansthan, Vill & P.OSaresar, Block- Jagadishpur, DisttSultanpur, Pin-227809	0.00	8.00
178	UTTAR PRADESH	Lucknow	Mangalam, Mangalam Sadan, Indira Nagar, Lucknow	31.00	31.00
179	UTTAR PRADESH	Mainpuri	Meenu Sharma Viklang Relief Society, Kuraoli- 205 265, Distt Mainpuri, UP	6.50	6.50
180	UTTAR PRADESH	J.P.Nagar	Navada Gramodyog Vikas Samiti, Mohalla-Bagala, Amaroha, J.P. Nagar-244221	1.50	5.00
181	UTTAR PRADESH	Lucknow	Netaji Subhash Chandra Bose Shiksha Vikas Samiti, M-12, Paper Mill colony, Nishetganj, Lucknow	1.50	0.00
182	UTTAR PRADESH	Barabanki	Patel Nagar Vikas Samiti , Krishn Nagar, Satrikh Road, Baranbanki	2.00	5.00
183	UTTAR PRADESH	Bareli	Prabhat Gramodyog Seva Sansthan	0.00	10.00
184	UTTAR PRADESH	Meerut	Samajothan Evam Shiksha Pracherini Sansthan, Lord Buddha Vidyapeeth, 563/7, Jagriti Vihar, Meeruth	0.00	8.00

185	UTTAR PRADESH	Basti	Sanchit Vikas Sansthan, Basti, UP	1.50	1.90
186	UTTAR PRADESH	Moradabad	Saraswati Educational Society, Harthala, Sonakpur, Moradabad, U.P.	5.00	7.00
187	UTTAR PRADESH	Varanasi	Shri Sachchidanand Shikshan Sansthan	0.00	4.00
188	UTTAR PRADESH	Gaziabad	Ujala Society, 316, Mandi Railway Road, Pilakhuwa, Distt Gaziabad, UP	1.25	0.00
189	UTTAR PRADESH	Allahabad	Upkar Pratisthan, H.I.G.150, Pritam Nagar, A.D.A. colony, Sulem Sarai, Allahabad-211001	6.00	15.00
190	UTTAR PRADESH	Lucknow	Vikalp, B-206, Rajajipuram, Lucknow	0.00	0.00
191	UTTAR PRADESH	Allahabad	Viklang Kendra, 13, Lukerganj, Allahabad	12.00	0.00
192	UTTARANCHAL	Tehri Garhwal	Gramin Kshetra Vikash Samiti (RADS)	0.00	10.00
193	UTTARANCHAL	Dehradun	Institute of Himalayan Awakening and Environmental Research, G-3, Nehru Colony, Dehradun- 248 001, Uttaranchal	3.75	0.00
194	UTTARANCHAL	Dehradun	National Institute for the Visually Handicapped, 116, Rajpur Road, Dehradun-248001	235.93	0.00
195	WEST BENGAL	Kolkata	Bikash Bharati Welfare Society, 20/1B, Lal Bazar street, Kolkata- 700001	6.38	0.00
196	WEST BENGAL	Midnapore	Bikramnagar Udayan Sangha, Vill-Bikramnagar, P.OHaria, Block-Khejuri-I, DisttMidnapore	7.50	15.00
197	WEST BENGAL	Murshidabad	District Health and Family Welfare Samiti	0.00	10.00
198	WEST BENGAL	Midnapore	District Rehabilitation Centre, Midnapore, P.O. & Distt Midnapore	23.30	0.00
199	WEST BENGAL	Bankura	ICRS, District Branch Bankura, Red Cross Bhawan, Near Court Compound, Bankura- 722 101, W. Bengal	10.00	0.00
200	WEST BENGAL	Dakshin Dinajpur	Indian Red Cross Society, District Branch Dakshin Dinajpur, P.OBalurghat, DisttDakshin Dinajpur, Pin-733101	5.06	0.00
201	WEST BENGAL	Nadia	Indian Red Cross Society, District Branch Nadia, D.L.Roy Road, P.OKrishnagar, Distt Nadia, Pin-741101	6.50	0.00

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204	WEST BENGAL	Kolkata	National Institute for Orthopaedically Handicapped, B.T. Road, Bon-Hooghly, Kolkata-700090	158.91	225.00
	WEST BENGAL	Jalpaiguri	Jaipaiguri Zilla Pratibandhi Punarvasan Kendra for DDRC Jalpaiguri	10.00	0.00
202	WEST BENGAL	Darjeeling	Indian Red Cross Society, Siliguri Sub-Divisional Branch, Red Cross Road, Hakimpara, P.OSiliguri, DisttDarjeeling- 734401	6.09	12.18

MINUTES OF THE FIFTEENTH SITTING OF THE STANDING COMMITTEE ON SOCIAL JUSTICE AND EMPOWERMENT HELD ON 1ST JUNE, 2006

The Committee met from 15.00 hrs. to 1650 hrs. in Committee Room 'B' Parliament House Annexe, New Delhi.

PRESENT

1. Smt. Sumitra Mahajan - Chairperson

MEMBERS

LOK SABHA

- 2. Shri M. Appadurai
- 3. Shri Ashok Argal
- 4. Shri Mahaveer Bhagora
- 5. Shri Eknath M. Gaikwad
- 6. Shri Sanat Kumar Mandal
- 7. Shri Rupchand Murmu
- 8. Shri Jual Oram
- 9. Shri Daroga Prasad Saroj
- 10. Smt. Pratibha Singh
- 11. Shri Lalit Mohan Suklabaidya
- 12. Smt. Usha Verma

RAJYA SABHA

- 13. Shri Silvius Condpan
- 14. Shri Dharam Pal Sabharwal
- 15. Shri Tarlochan Singh
- 16. Shri Veer Singh
- 17. Ms. Anusuiya Uikey

SECRETARIAT

1.	Shri A.K. Singh	Joint Secretary
2.	Shri R.K. Saxena	Deputy Secretary
3	Shri Bhunesh Kumar	Under Secretary

REPRESENTATIVES OF THE MINISTRY OF SOCIAL JUSTICE AND EMPOWERMENT

1.	Dr. Sundeep Khanna	Additional Secretary, SJE
2.	Shri Ashish Kumar	Joint Secretary (Disability Division)
3.	Shri P.N. Murthy	Joint Secretary (Social Defence Division)
4.	Shri Asjish Kumar	DDG (Disability Division)
5.	Mrs. Mridul Jain	Director (Disability Division)
6.	Shri S.A. Siddiqui	Deputy Secretary (Social Defence Division)
7.	Shri G.K. Singh	Deputy Secretary (Social Defence Division)

At the outset, Hon'ble Chairperson welcomed the Members and drew their attention to the Study tour programme of the Committee to Chandigarh, Shimla, Kinnaur, Mumbai and Panaji from 15th June, 2006 to 22nd June, 2006. Due to inclement weather at Shimla and Kinnaur, the Committee decided to cancel their entire programme at Chandigarh, Shimla and Kinnaur and undertake study visit to Bhopal, Indore, Dhar, Jhabua, Mumbai and Panaji from 17th June to 22nd June, 2006.

2. Hon'ble Chairperson then welcomed the representatives of the Ministry of Social Justice and Empowerment and drew their attention to the subjects

"Scheme of assistance to disabled persons for purchase/fitting of Aids and Appliances" (ADIP) and "Assistance to Voluntary Organizations engaged in implementing integrated programmes for welfare of older persons" selected by the Committee for detailed examination.

- 3. Hon'ble Chairperson observed that there are more than 21 million people in the country who are suffering from visual, hearing, speech and locomotive disabilities and enquired how many from amongst this population have been benefitted from the ADIP Scheme. She further pointed out the role played by the 17 Vocational Rehabilitation Centres in rehabilitating the disabled people.
- 4. Thereafter, the members raised various queries which <u>inter-alia</u> include data of disabled persons, criteria of State-wise budget allocations for disabled persons, working of NGOs, distribution of equipments to the target groups.
- 5. The Committee then took up the second subject on "Assistance to Voluntary Organizations engaged in implementing integrated programmes for welfare of older persons". Hon'ble Chairperson observed that this is one of the few schemes of the Ministry, wherein the Government only sanction the funds, but the actual implementation is carried out by the Non-Governmental Organizations. She further pointed out about the selection process for NGOs as well as enquired whether the NGOs can approach the Central Government directly, or their cases have to be recommended by the respective States/UTs.
- 6. Thereafter, the members raised various queries which <u>inter-alia</u> include Old Age Homes, Day Care Centres and Mobile Health Care Units, decreasing number of beneficiaries staying in Old Age Homes, working of NGOs etc.

- 7. The representatives of the Ministry responded to the queries. Hon'ble Chairperson directed them to send written replies to the queries of Members for which ready information was not available with them.
- 8. Hon'ble Chairperson thanked the Additional Secretary and other officials of the Ministry for giving valuable information to the Committee on the subjects and expressing their views in a candid manner.
- 9. A Verbatim record of the proceeding has been kept.

The Committee then adjourned.

ANNEXURE -V

MINUTES OF THE FOURTH SITTING OF THE STANDING COMMITTEE ON SOCIAL JUSTICE AND EMPOWERMENT HELD ON FRIDAY, 27TH OCTOBER, 2006.

The Committee met from 11.00 hrs. to 12.30 hrs. in Committee Room `D' Parliament House Annexe, New Delhi.

PRESENT

Smt. Sumitra Mahajan - CHAIRPERSON

MEMBERS LOK SABHA

- 2. Shri Eknath M. Gaikwad
- 3. Dr Babu Rao Mediyam
- 4. Shri Rupchand Murmu
- 5. Shri Lalit Mohan Suklabaidya
- 6. Smt Usha Verma

MEMBERS RAJYA SABHA

- 7. Shri Silvius Condpan
- 8. Shri Dharam Pal Sabharwal
- 9. Shri Tarlochan Singh
- 10. Shri Nand Kishore Yadav

SECRETARIAT

Dr. (Smt). P.K. Sandhu - Additional Secretary
 Shri A.K. Singh - Joint Secretary
 Shri R.K. Saxena - Deputy Secretary
 Shri Bhupesh Kumar - Under Secretary

REPRESENTATIVES OF THE MINISTRY OF SOCIAL JUSTICE AND EMPOWERMENT

SI.No.	Name of the Officer	Designation and Organisation
1.	Smt. Veena Chhotray	Secretary ,Ministry of Social Justice and Empowerment
2.	Shri Ashish Kumar	DDG Ministry of Social Justice and Empowerment
3.	Shri. Sanjay Sharan	Director (NI & DD-I)

At the outset Hon'ble Chairperson welcomed the members and representatives of the Ministry of Social Justice and Empowerment and drew their attention to the subject "Scheme of assistance to disabled persons for purchase/fitting of Aids and Appliances" (ADIP) selected by the Committee for detailed examination.

- 2. Hon'ble Chairperson enquired about the number of persons disabilities benefited under the ADIP Scheme during the last two years and the methodology adopted by the Government to ensure that funds released to the States, where NGOs or other Government Agencies exist, are effectively utilized for the welfare of the disabled. She further enquired about the details of the recommendations of the Satyam Committee Report and status of its implementation.
- 3. Thereafter, the members raised various queries which <u>inter-alia</u> include misuse of funds by NGOs, Promotion of Red Cross Societies, Awareness Camps,

working of District Disability Rehabilitation Centres (DDRCs), enhancement of budget allocations, distribution of equipments to the target groups.

- 4. The representatives of the Ministry of Social Justice and Empowerment responded to the queries. Hon'ble Chairperson directed them to send written replies to the queries of Members for which ready information was not available with them.
- 5. Hon'ble Chairperson thanked the representatives of the Ministry of Social Justice and Empowerment for giving valuable information to the Committee on the subject and expressing their views in a candid manner.

A verbatim record of the Proceedings has been kept.

The Committee then adjourned.

MINUTES OF THE FIRST SITTING OF THE STANDING COMMITTEE ON SOCIAL JUSTICE AND EMPOWERMENT HELD ON FRIDAY, 31st AUGUST, 2007.

The Committee met from 1500 hrs. to 1615 hrs. in Committee Room 'B', Parliament House Annexe, New Delhi.

PRESENT

Smt. Sumitra Mahajan - CHAIRPERSON

MEMBERS LOK SABHA

- 2. Mohd. Shahid Akhlaque
- 3. Shri Mahaveer Bhagora
- 4. Dr. Babu Rao Mediyam
- 5. Smt. Pratibha Singh
- 6. Shri Lalit Mohan Suklabaidya
- 7. Smt. Usha Verma

RAJYA SABHA

- 8. Shri Silvius Condpan
- 9. Dr. Narayan Singh Manaklao
- 10. Shri Abdul Wahab Peevee
- 11. Shri Dharam Pal Sabharwal
- 12. Ms. Anusuiya Uikey
- 13. Shri Nand Kishore Yadav

LOK SABHA SECRETARIAT

1. Shri R.K. Saxena - Director

2. Shri Bhupesh Kumar - Deputy Secretary

_	atulated them on their r	e-nomination to the Co	comed the Members and ommittee for the term 2007-
08.	XX X	XX X	XX X
3.	XX X	XX X	XX X
and	ct "Scheme of Assistance	ce to Disabled Persons	enty-seventh Report on the s for purchase/fitting of Aids oted the same without any

XXXXXX

XXXXXX

The Committee then adjourned.

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5.

APPENDIX

STATEMENT OF OBSERVATIONS/RECOMMENDATIONS

SI. No.	Para	Observations/Recommendations
1	2	3
1	1.49	The main objective of the Scheme of 'Assistance to Disabled Persons for Purchase/Fitting of Aids and Appliances' (ADIP) is to assist the needy physically handicapped persons in procuring durable, sophisticated and scientifically manufactured modern and standard aids and appliances, thus alleviating the effects of disability and helping them in their social, economic and psychological rehabilitation. The Committee, however, regret to observe that out of about 22 lakhs disabled persons in the country, only about eight lakh have been benefited under ADIP Scheme so far, which is an abysmally low coverage. The Committee are not happy with this state of affairs as it indicates the lack of dedication and causal approach on the part of the Ministry in handling the core issue of the social, economic and psychological rehabilitation of the handicapped people in the country. The Committee, therefore, recommend that the Ministry should prepare an action plan, in consultation with the implementing agencies of ADIP Scheme, to increase the coverage of beneficiaries so that the persons with disabilities could become more productive, their economic potential enhanced and the quality of their lives improved.
2.	1.50	The Committee are surprised to find that State/UT-wise targets are not fixed under the ADIP scheme by the funded agencies. Also the disability-wise information is not available with the Ministry. The argument put forth by the Ministry that targets are assessed by the number of proposals submitted by implementing agencies and that the progress of the work done by the implementing agencies is monitored through submission of utilization certificates at the time of release of the second installment is not convincing at all. In the absence of any disability-wise data the Committee feel that the Ministry would not be in a position to fix the targets for the scheme and to monitor its implementation effectively. The Committee, therefore, recommend that the Ministry should take steps to maintain the disability-wise data and also to impress upon the funded agencies to fix State/UT-wise targets under ADIP scheme vigorously so that the implementation of the scheme could be assessed properly.
3.	1.51	The Committee note that assistive devices are provided free of cost to persons having income up to Rs. 6,500 per month and

at 50 percent concession to persons with income between Rs. 6,501 and Rs. 10,000. The maximum admissible amount for purchase of a device is Rs. 6,000. The benefit of the scheme can be availed of again after a period of three years. Keeping in view the high cost of disability devices due to advancement in technology and rise in price index, the Committee desire that Government should examine the feasibility of increasing the maximum amount fixed for purchase of an assistive device.

5. 1.52

The Ministry have disbursed grants in aid of Rs. 55 crore, Rs. 63 crore and Rs. 58 crore to implementing agencies like Artificial Limbs Manufacturing Corporation of India (ALIMCO), National Institutes and NGOs during 2003-04, 2004-05 and 2005-06 respectively. Keeping in view the large number of needy disabled persons the funds allocated for providing assistive devices to them, are inadequate. The Committee, therefore, recommend that budgetary allocation under ADIP Scheme may be enhanced in accordance with the number of disabled persons in need of assistance so that maximum number of disabled persons could avail the benefits of the scheme.

The Committee further find that the allocation and release of funds under the scheme are not made State/UT-wise, in proportion to the number of persons with disabilities in respective States. Also the information regarding number of beneficiaries covered State/UT wise is not available with the Ministry. The Committee also observe that a large number of persons with various kinds of disabilities have not been benefited so far and some areas like Jammu & Kashmir and North East have been left uncovered. The Committee. therefore, recommend that funds may be allocated State-wise, in proportion to the number of persons with disabilities in respective States and ensure that funds allocated are fully utilized by the implementing agencies and targets achieved. The Committee also desire that number of beneficiaries covered State/UT wise be compiled so that the impact of the scheme could be assessed and regional imbalance in coverage may be rectified.

6. 1.53

The Committee have been given to understand that the ADIP Scheme is mainly implemented by the NGOs as they are very close to the people and have ability to reach and interact directly with the needy groups. However, the Committee find that NGOs are not encouraged by some State Governments particularly in North Eastern States. Consequently, the Ministry are facing difficulty in implementing the scheme in far flung and remote areas. The Committee, therefore, urge the Ministry to encourage the NGOs to operate in the North Eastern States and in remote/far flung areas by giving them some incentives

and by allowing them a substantial role in implementing the scheme with proper accountability so that the benefits could reach the uncovered areas. The Committee also desire that inexperienced NGOs should be provided technical support through National Institutes and District Disability Rehabilitation Centres.

7. 1.54

The Committee have further been informed that District Disability Rehabilitation Centres (DDRCs) are managed through a District Management Team (DMT) and are meant to provide longer counselling, generate awareness and also help in issue of disability certificates. At present 125 DDRCs are working for the disabled persons in the country. However, the Committee find that there are some problems in the DDRCs in terms of manpower availability. The Committee feel that unless such problems are taken care of and DDRCs strengthened with required number of rehabilitation professionals, these Centres would not be able to fulfill their assigned job. The Committee desire that for smooth functioning of DDRCs, their problems in terms of availability of manpower should be taken care of on priority basis so that they could render the desired services for the optimal benefit of disabled The Committee also recommend that District Disabilities Rehabilitation Centres should be opened in each district to provide counseling, generate awareness and mitigate the problems of disabled persons.

8. 1.55

The Committee also find that States' Welfare Secretaries as well as Commissioners for Disabilities of all States/UTs have been repeatedly requested to promote District Red Cross Societies for implementing the ADIP Scheme in their States. However, the Committee note with surprise that all the States/UTs have not promoted District Red Cross Societies in their respective States so far. Also no proposal has come from North Eastern States for setting up of District Red Cross Societies. The Committee urge upon the Ministry to ascertain the reasons for not promoting the District Red Cross Societies under ADIP Scheme from those States that have not promoted them so far. The Committee also recommend the Ministry to impress upon such State/UT Governments to expeditiously promote District Red Cross Societies in their respective States/UTs, particularly in North East States and far flung areas where no NGO is working so that benefits of the scheme could reach the large number of disabled persons.

9. 1.56

The Committee note that there are seven National Institutes namely National Institute for Mentally Handicapped, Secunderabad; Institute for the Physically Handicapped, Delhi; Ali Yavar Jung National Institute for the Hearing Handicapped, Mumbai; National Institute of Rehabilitation Training and Research, Cuttak; National Institute for the Visually

Handicapped, Dehradun; National Institute for Orthopaedically Handicapped, Kolkata and National Institute for Empowerment of persons with Multiple Disabilities, Chennai in the country for rehabilitation, research, clinical and therapeutic services to the disabled persons. These Institutes are mainly for persons who are suffering from visual, hearing, mental, orthopedic and Considering that a large number of multiple disabilities. persons are suffering from various types of disabilities, the Committee feel that the number of National Institutes is not sufficient to provide services to them to the desired extent. The Committee, therefore, recommend that more National Institutes for disabled persons may be set up in the country. Committee also recommend that Regional Institutes for various types of disabilities, particularly for the persons suffering from multiple disabilities, may be opened in the States for their benefit.

- 10. 1.57
- ALIMCO is the largest manufacturer of artificial limbs and rehabilitation aids for disabled persons. However, according to the Ministry more research is required in the field of aids and appliances especially by ALIMCO to enhance the comfort and convenience to the users. The Committee, therefore, desire that the ALIMCO and other Research Institutes should be given adequate financial assistance as well as required infrastructure and qualified manpower to take up the task of research in the field of aids and appliances by using advanced technology and to ensure availability of aids and appliance to the beneficiaries at affordable price.
- 11. 1.58
- Disability being a psychological injury and trauma particularly in cases of accidents, there is an urgent need for psychological rehabilitation of such persons by building a system of counselling and supporting them over a longer period of time to prepare them to face the reality. However, the Committee note with dismay that there is no specific component for psychological rehabilitation under the ADIP scheme. The Committee, therefore, urge upon the Government that this particular aspect of psychological rehabilitation of disabled persons should also be given priority and included in the scheme at the earliest.
- 12. 1.59
- The Committee note that the implementing agencies of ADIP scheme organize camps in various parts of the country for distributing assistive devices among the disabled persons. During the year 2004-05, the National Institutes and ALIMCO held 375 and 489 camps whereas in 2005-06 there were 318 and 410 respectively. However, the Ministry have no information about the number of camps held State-wise. Also no separate camps were organized to generate awareness among the disabled persons for using artificial limbs and appliances. Further, follow up camps to distribute equipments

to the left over disabled persons are seldom organized and that in the North East States coverage is very poor as only 39 districts in 2004-05 and 47 districts in 2005-06 were covered out of the total 76 districts. Keeping in view the importance of the scheme, the Committee desire that it should be given publicity more extensively and vigorously through both print and electronic media like TV/Radio Channels, in vernacular print media, and by distribution of pamphlets etc. Committee, also recommend that the implementing agencies of the scheme should organize more camps specifically for generating awareness regularly and distribute aids and appliances to all the needy persons particularly in remote and inaccessible areas with special thrust on uncovered/less covered areas/districts. Follow up camps should also be organized invariably so that the persons who could not get the assistive devices in the camps organized earlier, could be provided with such equipments as per their needs.

13. 1.60

The Committee find that the evaluation study on ADIP Scheme has been entrusted to M/s Santek Consultant Pvt. Ltd., New Delhi in December, 2004. However, their Report is still awaited. The Committee desire that the Government should emphasize upon M/s Santek Consultant Pvt. Ltd., to expedite the submission of the evaluation Report to the Government so that necessary remedial measures could be taken by them.

14 1.61

The Committee are constrained to note that the Ministry have not deputed any official/team for inspections in recent years. Also no target date has been provided for carrying out The Committee feel that in the absence of inspections. inspections by the Ministry and the monitoring agencies, effective implementation of the scheme can not be ensured. The reason given by the Ministry that the responsibility of inspections has been entrusted to the State Governments is not convincing at all as it is for the nodal Ministry to ensure effective implementation of the scheme. The Committee, therefore, recommend that a Monitoring Committee may be set up in the Ministry to ensure regular and strict monitoring of the implementation of ADIP scheme in a concerted and focused manner. The Ministry should also strengthen its monitoring mechanism and send the inspection teams periodically monitor the implementation of the scheme particularly in North-Eastern States.

15. 1.62

The Committee find that the Government had constituted a Standing committee for ADIP in April, 2003. The Committee had made some suggestions which included circulating the specifications of appliances in common use, inclusion of spectacles and low vision aid under the ADIP scheme, ensuring availability of infrastructure with agencies conducting more than 50 camps in a year, surprise inspection by

monitoring agencies, conducting a nation wide survey on usage of aids and appliances, strengthening of research and development of appliances and promotion of local institutes in unserved districts. The Committee feel sad to note that they have not been intimated about the action taken by the Government on the recommendations of the Standing Committee on ADIP, set up in 2003, so far. The Committee, therefore, desire the Government to implement the recommendations/suggestions of the Standing Committee on ADIP sincerely and apprise the Committee of the precise action taken thereon at the earliest.