IJRAR.ORG E-ISSN: 2348-1269, P-ISSN: 2349-5138

INTERNATIONAL JOURNAL OF RESEARCH AND ANALYTICAL REVIEWS (IJRAR) | IJRAR.ORG

An International Open Access, Peer-reviewed, Refereed Journal

ANALYSIS OF WELFARE SCHEMES IMPLEMENTED BY GOVERNMENT OF INDIA FOR AUTISTIC CHILDREN *(A DESCRIPTIVE STUDY)*

Deepika Verma, Prof. (Dr) Rajeev Kumar
PhD Research Scholar, Supervisor
Department of Sociology
Dayanand Brajendra Swaroop College, Kanpur
Affiliated with
Chhatrapati Shahu Ji Maharaj University, Kanpur-208024**,** Uttar Pradesh, India.

Abstract – Ministry of Social Justice and Empowerment deals with the welfare of people with special needs and aims to provide social justice so that they can have a better standard of living. It works under the guidelines of National Trust for the Welfare of Person with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act 1999. According to this act, many schemes run with the objective of all round development and support for Persons with Disabilities (PWDs).
This paper aims to do an analysis of four such schemes with are DISHA, VIKAAS, SAMARTH, and GAHARUNDHA. These schemes are designed for PWDs of different age groups and especially for children. They aim to provide educational support, healthcare facilities, training, counselling etc for them as well as their families. Their effectiveness and implementation rate in different parts of India, is being discussed here. The analysis indicates that high improvement is needed. The schemes will be successful only when they will reach to each and every PWD who needs care and support.

Keywords- Social Justice, Mental Retardation, Social stigma, welfare.

I. Introduction

The term 'Autism' was first coined by Swiss psychiatrist Eugen Bleuler (1911) to describe a particular type of schizophrenia, observed by him in children. In late 1970's, autism was reconceptualized as a developmental disorder and with gradual experiments and medical developments, today's biological explanation of autism can be viewed as a spectrum range of behavioural disorders from lower to higher severity levels, commonly known as Autism Spectrum Disorder (ASD). People with ASD face problems in social interaction, communication and slow repetitive or restricted behaviour. They have different functioning patterns in their brain which led to different ways of learning, paying attention and behaviour. As a result, they require special care and medical as well as social attention for their well-being and better life.
To aid such children as well as adults, Government of India has set up a statutory body in ministry of Social Justice and Empowerment, popularly known as 'The National Trust' under the "National Trust for the Welfare of Person with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act" (Act 44 of 1999). This trust works towards creating an inclusive society which enables an environment that helps in providing the persons with disabilities and their families equal opportunities, a comprehensive supportive system, independent lives and a 'we feeling' of a community. It works for the welfare of the persons suffering from mainly four types of disabilities which includes autism, cerebral palsy, mental retardation and multiple disabilities.

II. Welfare schemes for mentally retarded children

Autism and other mental disability conditions are increasing day by day among children due to many reasons like unhealthy lifestyle, poor nutrition, pollution, environmental damage and so on. One such child in family adversely affects the living conditions of whole family.

Ananya Ray Laskar, Vimal K. Gupta, Dharmendra Kumar, Nandini Sharma & Megha M. Singh (2010) in their article, concluded that the parents of such children are heavily burdened in terms of financial burden and mental health and urgently require support activities at a national level.[1].

Kartik Kashyap, Ravish Thunga, Arjun K. Rao and N. P. Balamurali (2012) aimed to access the severity of disability and also the trends of utilization of disability benefits over a period of 3 years, have find out that cases of mental retardation have increased over the years and a large section of mentally disabled, especially in rural areas are unable to get government benefits. It is due to low awareness level among them.[2]

Seetharam, M. (1983) has made an attempt to check the accountability of social welfare services running for disabled and concluded that they will be accountable only when the services received will be actually same as services provided. [3]

All these studies clearly show that there is an urgent need to pay attention towards the status check of the welfare schemes running under National Trust for disabled persons. For that first of all, let's see the details of the schemes running under National Trust-

1. **DISHA-** It is an early intervention and school readiness scheme. It covers children under age group of 0-10 years with four types of disabilities mentioned in National Trust Act. Disha centres are being set up and they aim to provide early intervention for persons with disabilities through different trainings, therapies and counselling. The registered organisations (RO) in different states and UTs under National Trust having two years of working experience with persons with disabilities (PWDs)become eligible to apply for Disha scheme and can open Disha centres. At the centre Day care facilities are provided to PWDs for at least 4 hours a day. The maximum batch size of each Disha centre should be 26 PWDs. The staff should include a Special Educator/ Early Intervention Therapist which should be present every day at the centre, a Physiotherapist or Occupational Therapist 3 times a week, Counsellor 3 times a week, a Caregiver, and a Aya who should be present every day at the centre.

The infrastructure facilities must include one medical/ assessment room with all the therapeutical aids and appliances, one activity room and one recreation room. Each centre should have a computer set up and net connection. The National trust provides three types of fundings to Disha centres which include setup cost, sustenance cost, and monthly recurring cost. It helps mainly disabled children who come from BPL (below poverty line) and LIG (low-income group) families. The growth and development of each child is monitored through and evaluation. The parents are provided counselling and guidance.

2. **VIKAAS-** It is a day care scheme, primarily focus on the disabled persons of higher age group of 10 years and above. It helps in enhancing interpersonal and vocational skills and also provide a six-hour day care so that the family members of disabled persons can get some time to fulfil other responsibilities. The process of opening a Vikas centre is same as Disha centre. The maximum strength of each centre should be 39 PWDs. All other things like facilities and funding etc are same as Disha scheme.

3**. SAMARTH**- This scheme aims to provide respite homes to orphans, abandoned and persons with disabilities, mainly from BPL (below poverty line) and LIG (Low income group) families. Samarth centres are being set up which provide temporary institutional care and provide relief to persons with disabilities and their families.

4. **GHARAUNDA-** the main objective of this scheme is to provide group home for adults suffering from different types of disabilities mentioned in National Trust Act. It provides quality care service and better living standards along with basic medical care.

5. **NIRAMAYA-** It is a health insurance scheme with provide affordable health insurance to persons with Autism, Cerebral Palsy and multiple disabilities. The enrolled beneficiaries get health insurance cover up to Rs 10 lakh, which provide aid in their diagnostic test, medicines, pathology, therapies and other medical attentions.

6**. SAHYOGI-** It is a caregiver training scheme. Caregiver cells (CGCs) are being set up, which provide training and skills to caregivers, so that they can take care of disabled persons and their families. It also provides parents a facility to get trained in caregiving in two levels of courses primary and advanced.

7. **GYAN PRABHA**- This scheme provides educational support to persons with special need, for pursuing educational and vocational courses like graduation courses, professional courses and vocational training. It helps in achieving self-employment. A specific amount is provided to them for their fees, books and other expenses.

8. **PRERNA**- It is a marketing assistance scheme which aims to create feasible and widespread channels for the sales of the products made by disabled persons. It provides funds to participate in exhibitions, fairs etc so that the products made by persons with disabilities can be sold. Different work centres are being set up, in which 51% employees should be persons with disabilities covered under National Trust Act.

9. **SAMBHAV-** This scheme comes with an aim of setting up one Sambhav centre in each city of India having population more than 5 million according to census 2011. These centres are set up as an additional resource centre, to provide information and easy access to devices, aids, appliances etc for the betterment of PWDs. A page on National Trust website is also developed which aims to showcase and provide details about the aids and assistive devices for Sambhav.

III. Analysis of Welfare Schemes

Before analysing the welfare schemes, let's find out the statistics of persons with disabilities between age group of 0-14 years, between age group of 15-59, and age group of 60 and above in all the states and UTs of India. Following table has been prepared through analysing the data of disabled people in India from census 2011. The values are higher in states and UTs with higher population and lower in states and UTs which has less population.

Table 1.1- State and UT wise distribution of PWDs of different age groups according to census 2011*.

Area Name	Age group 0-14	Age group 15-59	Age group 60 & above
India	395634	1014913	95417
Jammu & Kashmir*	3857	11336	1531
Himachal Pradesh	1918	6390	678
Punjab	9780	31912	3378
Chandigarh	292	765	33
Uttarakhand	2732	7971	747
Haryana	7362	20653	2055
NCT of Delhi	4071	11489	778
Rajasthan	22287	53637	5465
Uttar Pradesh	49987	119134	12221
Bihar	26663	55946	6642
Sikkim	86	377	53
Arunachal Pradesh	368	818	78
Nagaland	205	921	124
Manipur	966	3453	427
Mizoram	274	1162	149
Tripura	726	3226	355
Meghalaya	577	1634	121
Assam	5183	18888	2303
West Bengal	27494	97971	11058
Jharkhand	10651	24329	2478
Odisha	20441	46797	5161
Chhattisgarh	8944	22507	1720
Madhya Pradesh	20020	52934	4849
Gujrat	20202	43305	2886
Daman & Div*	37	136	3
Dadra & Nagar Haveli*	65	109	6
Maharashtra	48984	103552	7673
Andhra Pradesh	34182	88977	9221
Karnataka	25320	63504	5150
Goa	396	1272	149
Lakshadweep	28	81	3
Kerala	12084	49870	3755
Tamil Nadu	28748	68067	4032
Puducherry	641	1577	117
Andaman & Nicobar Islands	63	213	18

In above table 1.1 the population of mentally retarded persons of all categories have been classified under different sub-headings. The numbers combined both population of rural and urban areas and it is clearly visible that the numbers are huge and all of them need special needs and care. Highly populus states like Uttar Pradesh, Madhya Pradesh, Rajasthan, Maharashtra etc. have high number of mentally retarded population and also most of them are below poverty line or from low-income groups which make the situation more critical in these states and require more attention from government as well as private organisations. The schemes are government initiatives so that aids can be provided especially in such regions. So, lets analyse them quickly and bring out the changes that they have made in life of PWDs.

This research paper aims at analysing the effectiveness of four welfare schemes among nine which have been introduced earlier. They are DISHA, VIKAAS, SAMARTH, and GHARAUNDA. The following table illustrates about the number of centres running under these schemes in different states and UTs in India.

Table 1.2 State and UT wise distribution of centres running under different schemes of The National Trust.

Area Name	DISHA	VIKAAS	SAMARTH	GHARAUNDHA
1.Madhya Pradesh	2	6	1	4
2.Uttar Pradesh	2	8	4	4
3.Delhi	3	2	-	2
4.West Bengal	5	1	-	2
5.Karnataka	6	1	-	1
6.Haryana	2	3	-	-
7.Tamil Nadu	1	3	2	-
8.Manipur	2	-	-	-
9.Chandigarh	1	-	-	-
10.Meghalaya	1	-	-	-
11.Bihar	1	1	-	-
12.Chhattisgarh	1	-	-	-
13.Gujrat	2	1	1	-
14.Kerala	1	-	-	-
15.Rajasthan	2	-	-	1
16.Assam	3	-	1	-
17.Telangana	-	3	1	1
18.Maharashtra	-	1	1	1
19.Andhra Pradesh	-	2	-	2
20. Odisha	-	1	1	3
21.Himachal Pradesh	-	1	-	-
22.Punjab	-	1	-	-
23.Jammu & Kashmir	-	2	-	-
24.Puducherry	-	-	-	1
25.Uttarrakhand	-	-	-	1
26.Tripura	-	-	-	1
Total	**35**	**37**	**12**	**24**

Now let's do a quick analysis of the above four welfare schemes with the help of the data mentioned in the tables 1.1 and 1.2.-

1.DISHA- It is an early intervention and school readiness scheme, which aims at setting up Disha centres for children who are grouped in age of 0-10 years. As per the directions given by National Trust the maximum batch size for 1 Disha centre should be 26 children and if the number exceeds more than 26 than the registered organisation should apply for a new Disha centre. Now, the data in the tables depict that the total population of children in age group of 0-14 years of India according to census 2011 is 395634 including both rural and urban areas but the total number of Disha centres which have been set up in different parts of the country are just 35, which means they can contain only 910 children than what about other 394724 children. The argument that can be made to this statement is that the data also include children in the age group of 11-14 years and not everyone prefers government centres for their children but it can be contradicted because the majority population of kids lie within the range of 0-10 years of age and not everyone is rich enough to afford private organisations. It is very clear from the table 1.1 and 1.2 that Disha centres are set up only in 14 states and 2 UTs and that also very less in numbers. Other states and UTs, despite having huge population of disabled children have no Disha centres at all.

2. **VIKAAS-** It is a day care scheme and the main focus is kept on children in age group of 10 years and above. The objective of this scheme is to enhance interpersonal and vocational skills of PWDs. Vikaas centres play an important role in development of disabled children especially when they belong to Low-income group families. The ground reality check of this scheme is also same as Disha scheme. There are just total 37 Vikaas centres all over India Registered under National Trust. Despite having high disability population in states like Madhya Pradesh, Uttar Pradesh, Bihar, Kerala etc., the number of centres is not even in double digits.

3. **SAMARTH-** The main objective of this scheme is to provide respite homes to orphans, persons abandoned by their families and also PWDs having four types of disabilities mentioned under National Trust. The total number of Samarth centres registered so far are just 12. According to table 1.2 there are only 4 Samarth centres in Uttar Pradesh, just 1 in Madhya Pradesh, 2 in Tamil Nadu and just 1 centre in Gujrat, Assam, Telangana, Maharashtra and Odisha each. The numbers are very low and the scheme almost seems ineffective due to that.

4**. GHARAUNDHA**- This scheme aims to provide group homes and minimum quality of care facilities throughout the life of PWDs. This scheme is crucial for those PWDs who are not excepted by their families dur to social pressure and dilemmas. The number of centres opened so far under this scheme are just 24. How the objectives of this scheme can be achieved if the implementation process is so passive.

IV. Reasons for Ineffectiveness

The formation of schemes and implementing them are two totally different jobs. The scheme implementation is always been an issue in India. Many reasons contribute in this scenario. The implementation process itself is designed in such a complicated manner that it becomes a hurdle in achieving the objectives. Corruption is still a big issue. The funds released do not reach to the persons who actually need them. Also, the fund with is allocated for these above-mentioned schemes by the government is very low. Disha scheme is just provided with 1,55000 set up cost which is very less as infrastructure requires much higher amount. Vikaas, Samarth and Gharaundha schemes have same issue. The registration rate is very slow which needs to be increased at any cost. It is duty of the Registered Organisations to work more on this. The awareness level for the mental retardation is a big problem. Because of that, the number of admissions of disabled children in these centres is at very poor state. Children are kept in homes due to social stigmas, that is one of the mains reasons for the infectiveness of these schemes.

V. Way Forward

Table 1.1 and 1.2's data depictions clearly portraits the ground reality of the welfare schemes for autistic and other disabled persons. Certain reforms are required so that their benefits can reach up to every person that needs them. First of all, the implementation rate should be increased. Government should bring incentives for that. The implementation process should be relaxed. Public funding and donation campaigns should be organised for raising the funds required for better infrastructure and facilities. Awareness campaigns and advertisements on TV and online platforms can be utilised very well for increasing awareness about autism and other mental retardation and about the schemes and their benefits as well. This will help in changing the prospective of people about the mental retardation. In this way more and more PWDs will come forward and will be able to seek benefits available for them. A vigilance department should be set up to keep a check on corruption and proper implementation of schemes.

VI. Conclusion

Society was designed by our ancestors with an aim of cooperation and cordiality. In ancient times societies were simple, living in mechanical solidarity. As the society developed and organic solidarity came in existence, the complexity in social structure increased. As a result, a standard definition of 'a normal being' was created. Hence, the persons who did not match the criterion of this definition were kept separated from a normal life. Persons with disabilities whether it is autism, cerebral palsy, or any other mental condition, being one of them, were looked down upon and had to deal with versatile range of difficulties. But alike a normal being they also deserve equal opportunities and a normal life. So, as a society it is our duty to welcome them with open arms and support them to achieve their goals. They too can live a normal life, only when the honest efforts will be made for them.

References

1. Laskar, A.R., Gupta, V.K., Kumar, D. *et al.* Psychosocial effect and economic burden on parents of children with locomotor disability. *Indian J Pediatr* **77**, 529–533 (2010). https://doi.org/10.1007/s12098-010-0064-7
2. Kashyap K, Thunga R, Rao AK, Balamurali NP. Trends of utilization of government disability benefits among chronic mentally ill. Indian J Psychiatry. 2012 Jan;54(1):54-8. doi: 10.4103/0019-5545.94648. PMID: 22556439; PMCID: PMC3339221.
3. Seetharam, M. (1983). Accountability in Social Welfare Services. Indian Journal of Public Administration, 29(3), 641–650. https://doi.org/10.1177/0019556119830317
4. https://thenationaltrust.gov.in
5. https://vikaspedia.in/social-welfare/differently-abled-welfare/schemes-programmes/schemes-of-the-national-trust/trust-fund-for-empowerment-of-persons-with-disabilities/
6. National Portal of India https://www.india.gov.in/samarth-scheme
7. https://censusindia.gov.in/census.website/data/census-tables
8. https://www.wikipedia.org