



PROJECT CHUNAUTI

*A Model Of Intervention For The Rehabilitation And
Social Re-integration Of Orphaned Children With
Intellectual Disabilities*

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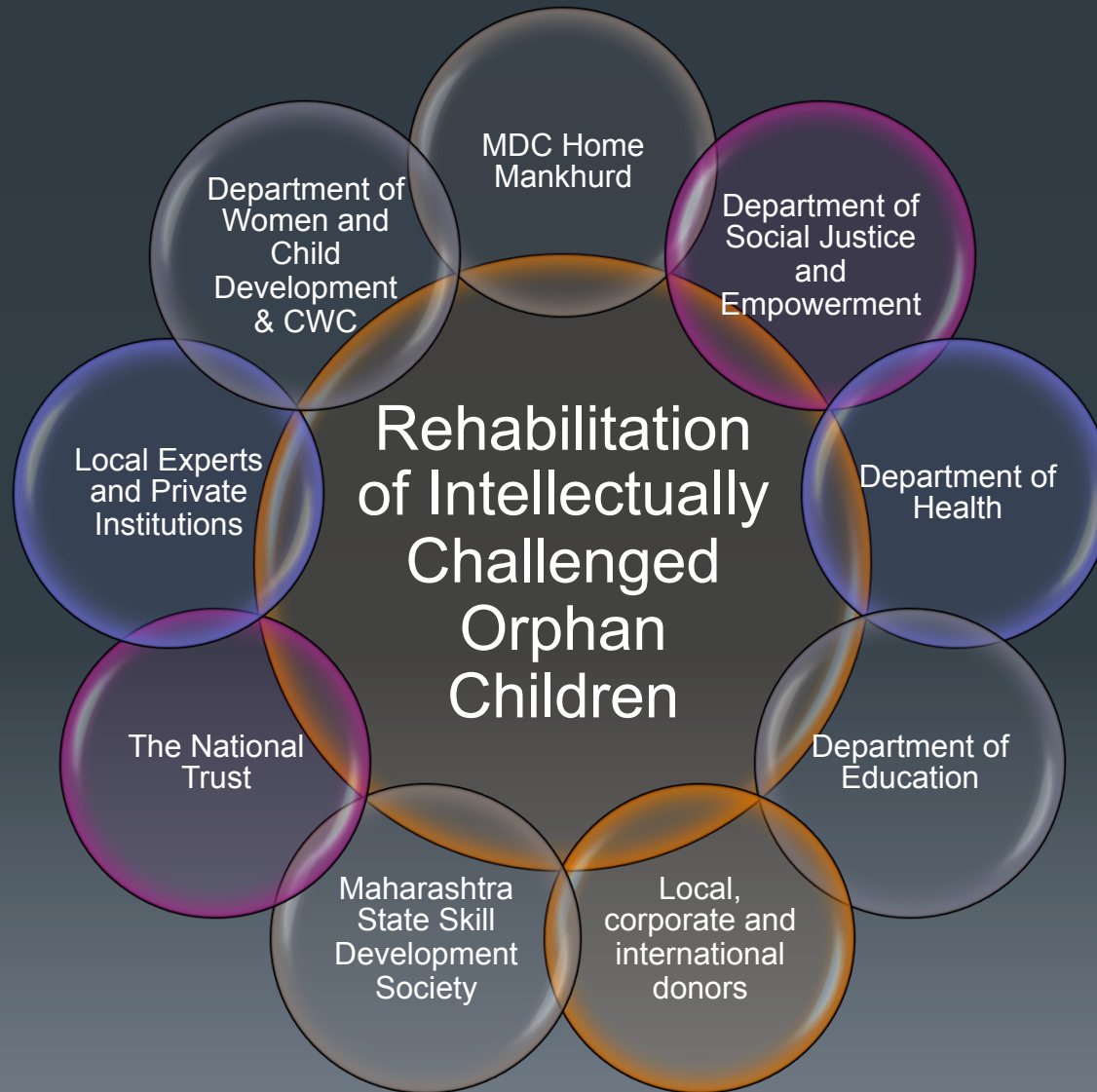
DISABILITY- SOCIETY AND POLICIES

- Disability vs. normal- confirms with average- normal curve
- Disability as a social concept- attitudes, practices policies
- Discrimination as a result of social notions
- Disability- discrimination due to social restrictions placed by a highly discriminatory society
- Disability distinct from a medical condition
- A society's understanding of discrimination reflected in its policies
- Laws not sufficient end discrimination

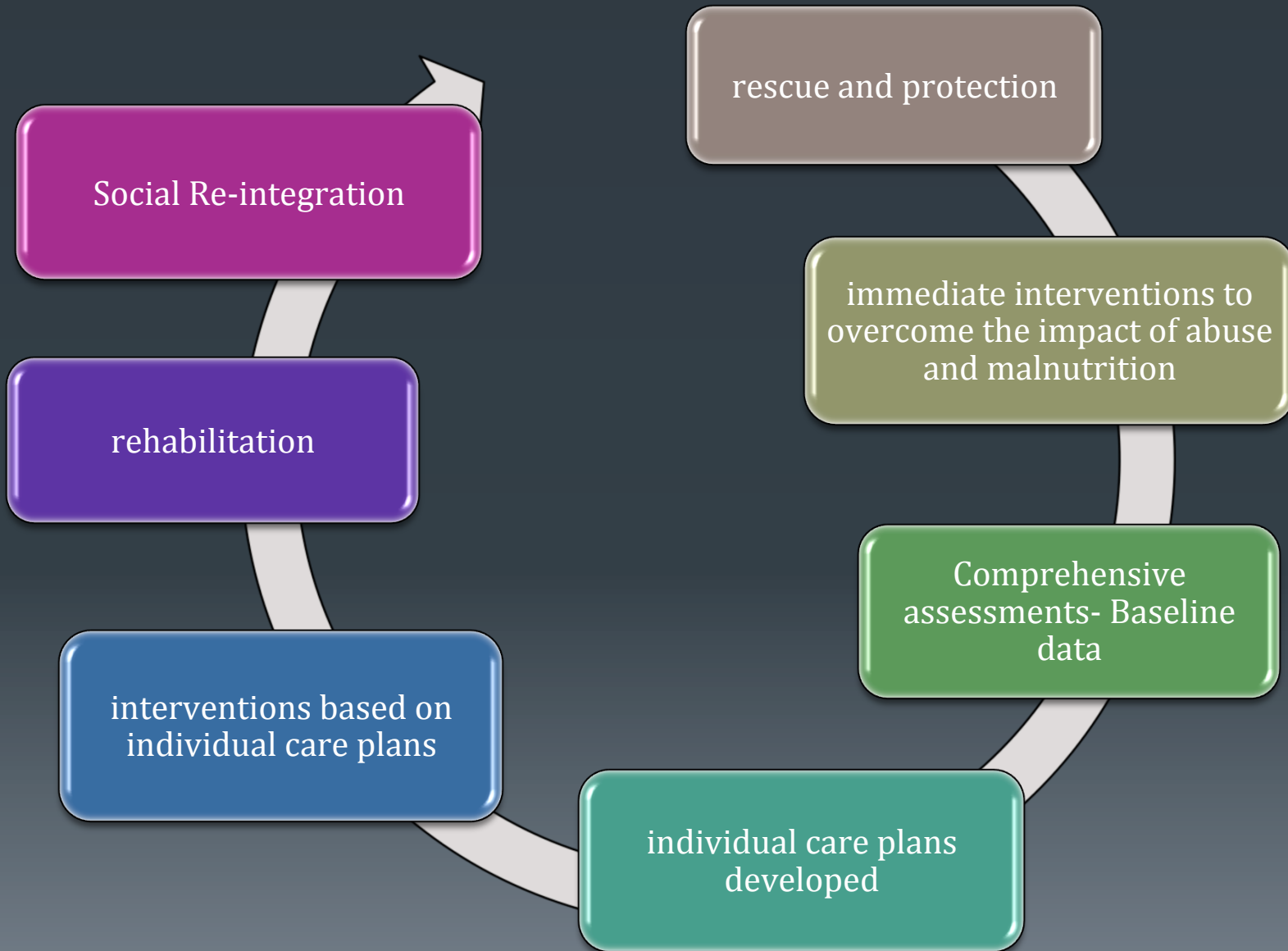
SOCIAL INTEGRATION

- Social Integration- used interchangeably with social inclusion, social cohesion and social capital
- Components of social integration: access to services, opportunities for development, social interaction, dignity and enjoyment of rights
- Social integration of excluded persons needs adequate support systems
- Social integration of intellectually disabled, orphans- a challenge

Multi-stake holder approach



Process of social integration



Assessments and Planning for children

Baseline assessments:

- Medical check up
- IQ/SQ
- Occupational assessment
- Speech and Hearing assessment
- EEG

Comprehensive assessments

- Mental health indicators: *E.g.: impact of abuse, trauma, psychiatric illnesses- **Counseling plan***
- Social behavioral indicators: *E.g.: Adaptation to the institution, group behavior, peer group, communication, decision making, sexuality- **Life skill plan***
- Educational status and trainability: *Eg: Reading, writing, interest in schooling- **education plan***
- Occupational skills indicators : *Eg: Fine motor skills, gross motor skills, toilet training- **Occupational Therapy plan***
- Vocational ability indicators: *E.g.: understanding tasks, following instructions, working in a group, interests- **Vocational training plan***

Major Interventions with children under the Project



Indicators to measure children's progress

- Standardized tools used for initial assessments and review of progress over a period of time
- Multi-disciplinary assessments undertaken- specialists as well as care-givers were involved
- Existing tools adapted to the specific group of children
- New indicators developed for every intervention
- Non-Standardized, cross-thematic indicators
- Indicators were subjective and based on children's responses

Indicators for social re-integration

- Overcoming the trauma of abuse
- Protecting oneself
- Future planning
- Self- esteem
- Communication
- Education
- Job readiness and opportunities
- Independence
- Understanding the world outside the Institution
- Support systems and linkages
- Government Policies

Model of intervention

INPUTS FROM HOME:

Appropriate staff, material and equipment, Protocols for child protection, guidelines for staff, regular staff trainings on mental retardation, sexual abuse, positive disciplining, child rights, linkages for medical needs, educational and vocational needs

INPUTS FROM DWCD & SJ:

Timely release of funds, organizing regular trainings, providing linkages for vocational training, experts and social re-integration, regular monitoring the of care plans by CWC and SJ

PROCESS OF REHABILITAN AND SOCIAL RE-INTEGRATION:

- Comprehensive assessment
- Counseling
- Life skill education
- Therapy for severe and profoundly challenged
- Vocational training
- Staff capacity building
- Care planning

EXPECTED OUTCOMES:

1. Children attending school and learning as per their capacities.
2. Children able to identify and report abuse of any kind.
3. Children contended and happy
4. Some children able to be socially re-integrated.
5. Others able to manage varying degrees of self reliance
6. No use of corporal punishment

Child rights approach

Regular review

Proper implementation of protocols

Civil society

Child participation

Vision for children

Good Practices



- A clear goal of social integration established at the beginning of the project
- Several new, non-standardized indicators developed
- The first intervention addressed the abuse faced by the children
- Formal, inclusive education undertaken for those capable. This lead to socialization and future aspirations
- IQ test not taken as conclusive- inputs and exposure found to boost IQ
- A replicable model, adaptable to specific conditions emerged

Challenges



- Lack of vision among authorities and Home staff
- Lack of policies and support systems to make the environment conducive for social integration
- Wrong assessments and labeling
- Lack of accountability by government, Home and NGOs



Thank You



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