



Composite Regional Centre for Skill Development, Rehabilitation & Empowerment of Persons with Disabilities

CRC Bhopal - Newsletter

Issue No. 7 | Jan / 2026



Director's Pen...

January 2026 at CRC Bhopal was defined by a robust commitment to community outreach and formal recognition by national leadership. Our awareness activities reached new heights through targeted early identification and UDID registration drives, ensuring essential services reached remote populations. These efforts were validated by the visits of **Dr. Virendra Kumar Ji**, Hon'ble Minister of Social Justice & Empowerment (GoI), and **Shri Vishvas Kailash Sarang Ji**, Hon'ble Minister (Govt. of MP), who reviewed the progress of the Pradhan Mantri Divyasha Kendra (PMDK) and discussed expanding vocational skill development and universal design initiatives.

A central pillar of this success was the intensification of Parent Training Programmes at our Cross-Disability Early Intervention Centre (CDEIC). By providing specialized training in home-based therapy and psychological resilience, we have empowered caregivers to bridge the gap between clinical intervention and daily life. This holistic, community-driven approach continues to strengthen the support ecosystem for Divyangjan across the region.

We are dedicated to sustaining our momentum, consistently meeting the high standards and targets defined by our roadmap toward becoming a Center of Excellence.



Dr. Narendra Kumar
Director, CRC Bhopal



About CRC Bhopal

CRC, Bhopal was established on 14 August 2000 by National Institute of Empowerment of Persons with Intellectual Disabilities (NIEPID), Secunderabad under the Scheme of Implementation of the Rights of Persons with Disabilities Act (SIPDA). It was realigned in February 2006 to Ali Yavar Jung National Institute for the Speech & Hearing Disabilities (Divyangjan), Mumbai, an autonomous body under the Department of Empowerment of Persons with Disabilities (DEPwD), Ministry of Social Justice & Empowerment, Government of India. From August 2024, CRC Bhopal is under administrative control of National Institute of Mental Health Rehabilitation (NIMHR) Sehore, Bhopal Madhya Pradesh. CRC Bhopal has been working for persons with disabilities in the Central India region by providing rehabilitation services for all categories of persons with disabilities. The center was conferred with the national award for barrierfree environment in the year 2006. Apart from rendering rehabilitation services, CRC Bhopal also offers various long term and short-term training programmes recognized by Rehabilitation Council of India, implements various schemes and programme of DEPwD like CDEIC, PMDK, Skill Development, registration for UDID, Niramaya etc. and conducts awareness generation activities and different levels which includes grassroot level functionaries, parents, NGOs etc.

CRC aims to empower persons with disabilities (divyangjan) to live independently and contribute to the community like everyone else.

The primary objective of setting up CRC is to create the infrastructure required for training and manpower development, research, and providing services to persons with disabilities, particularly in those parts of the country where such infrastructure is lacking. CRC has following objectives:-

- To serve as a resource centre for rehabilitation and special education of persons with disabilities.
 - To establish linkages with existing medical, educational, and employment services, following the principles of community-based rehabilitation and offer extension services in rural areas.
 - To stimulate the growth of services by encouraging and supporting voluntary organizations, parent groups, and self-help groups.
 - To undertake human resource development by training rehabilitation professionals, village level workers, multi-rehabilitation workers, and other functionaries in the government and non-government sector required for providing services to persons with disabilities.
 - To develop strategies for delivering rehabilitation services suitable to the socio-cultural background of the region.
 - To undertake research and development with specific reference to the needs of diverse groups of people with disabilities, keeping in view the nature and severity of disability in the region.
 - To undertake public education programs for the creation of awareness in the parents and the community.
 - To undertake designing, fabrication, and fitment of aids and appliances to help individuals overcome their disability.
 - To conduct the service of education and skill development leading to the enhancement of opportunities for employment, rehabilitation, mobility, communication, recreation, and integration in society.
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Historical Data

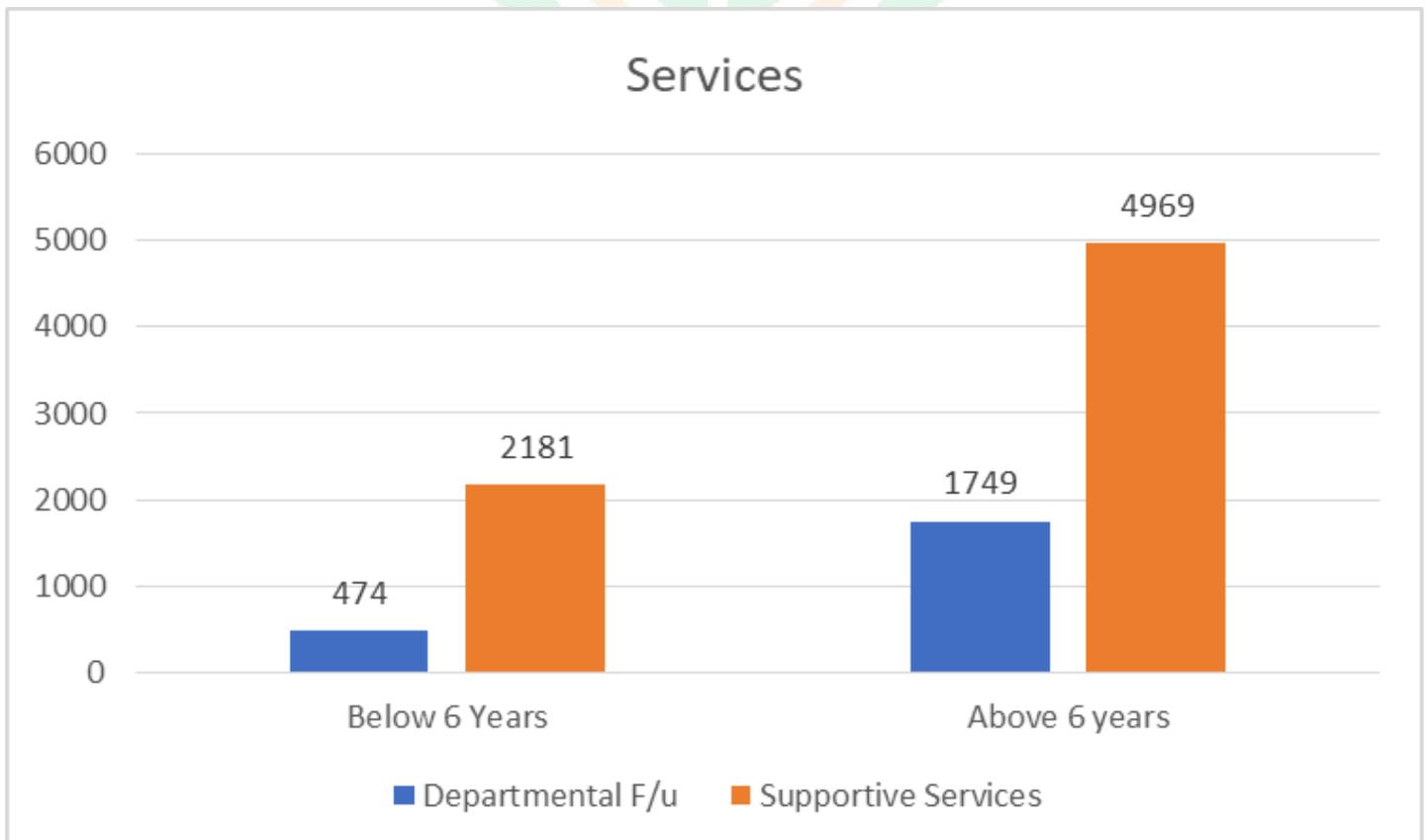
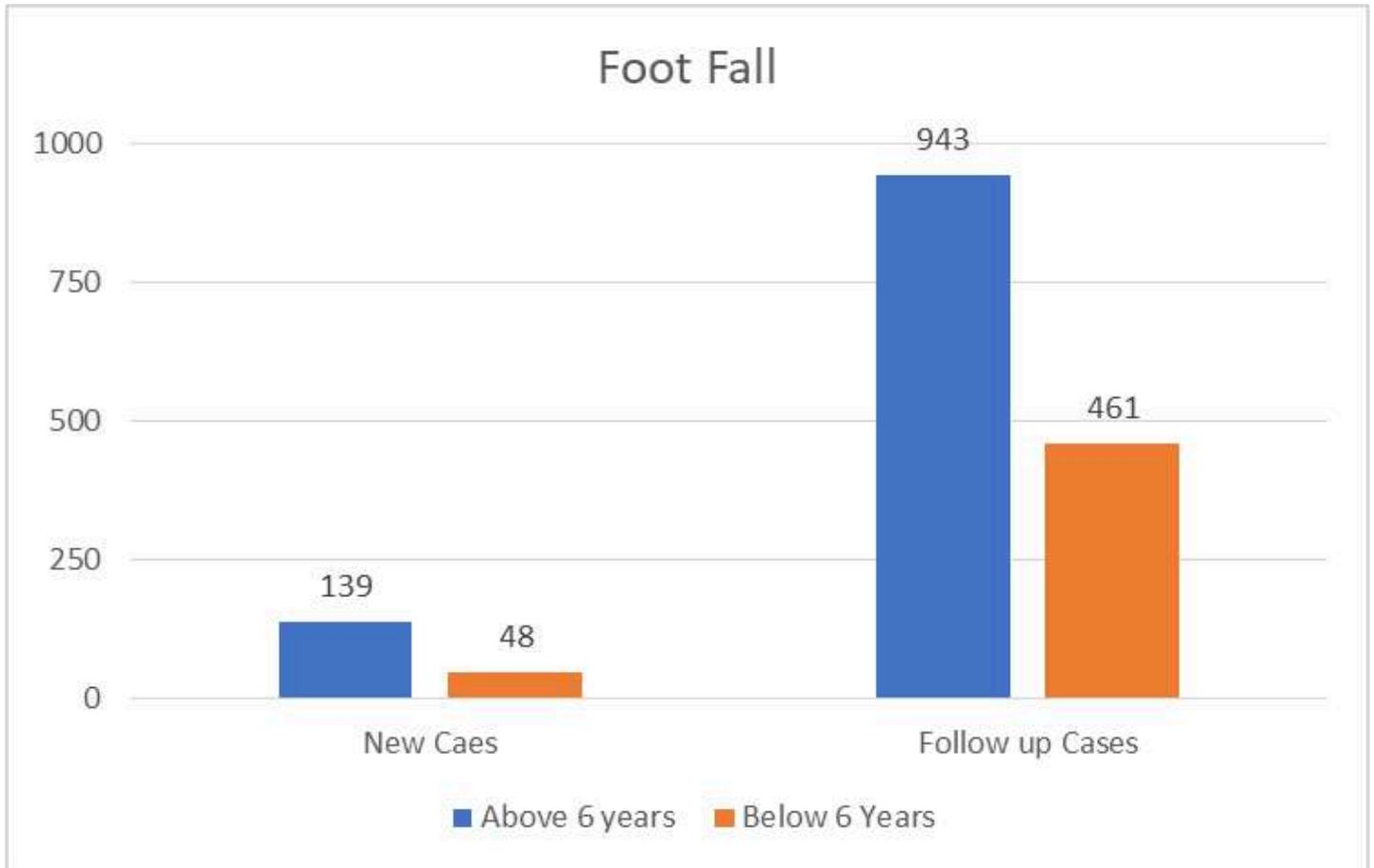


NIMHR

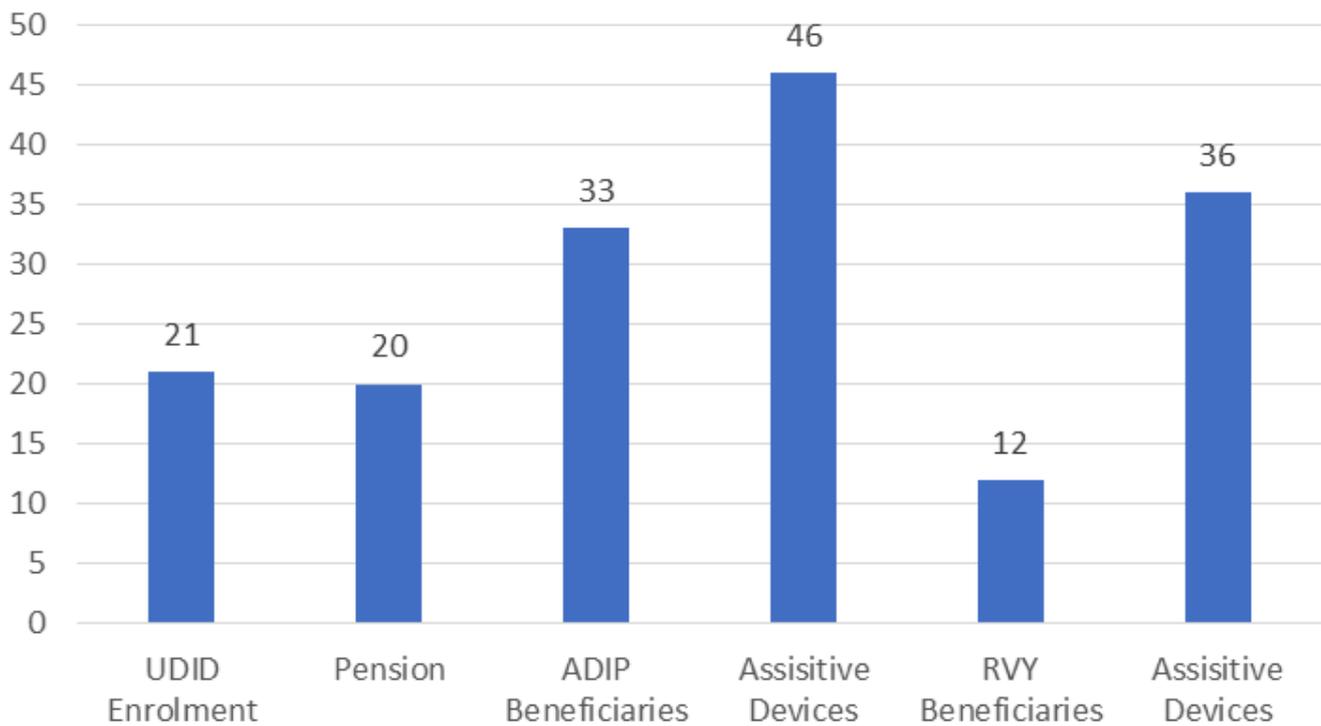
The Composite Regional Centre (CRC) Bhopal was honored with the National Award for the Welfare of Persons with Disabilities by the Government of India. The award was presented by former President Dr. A.P.J. Abdul Kalam in recognition of CRC Bhopal's outstanding contribution toward creating a barrier-free and inclusive environment. This achievement reflects the center's dedication to rehabilitation, accessibility, and empowerment of persons with disabilities.



Highlight for the Month of Jan 2026



Schemes



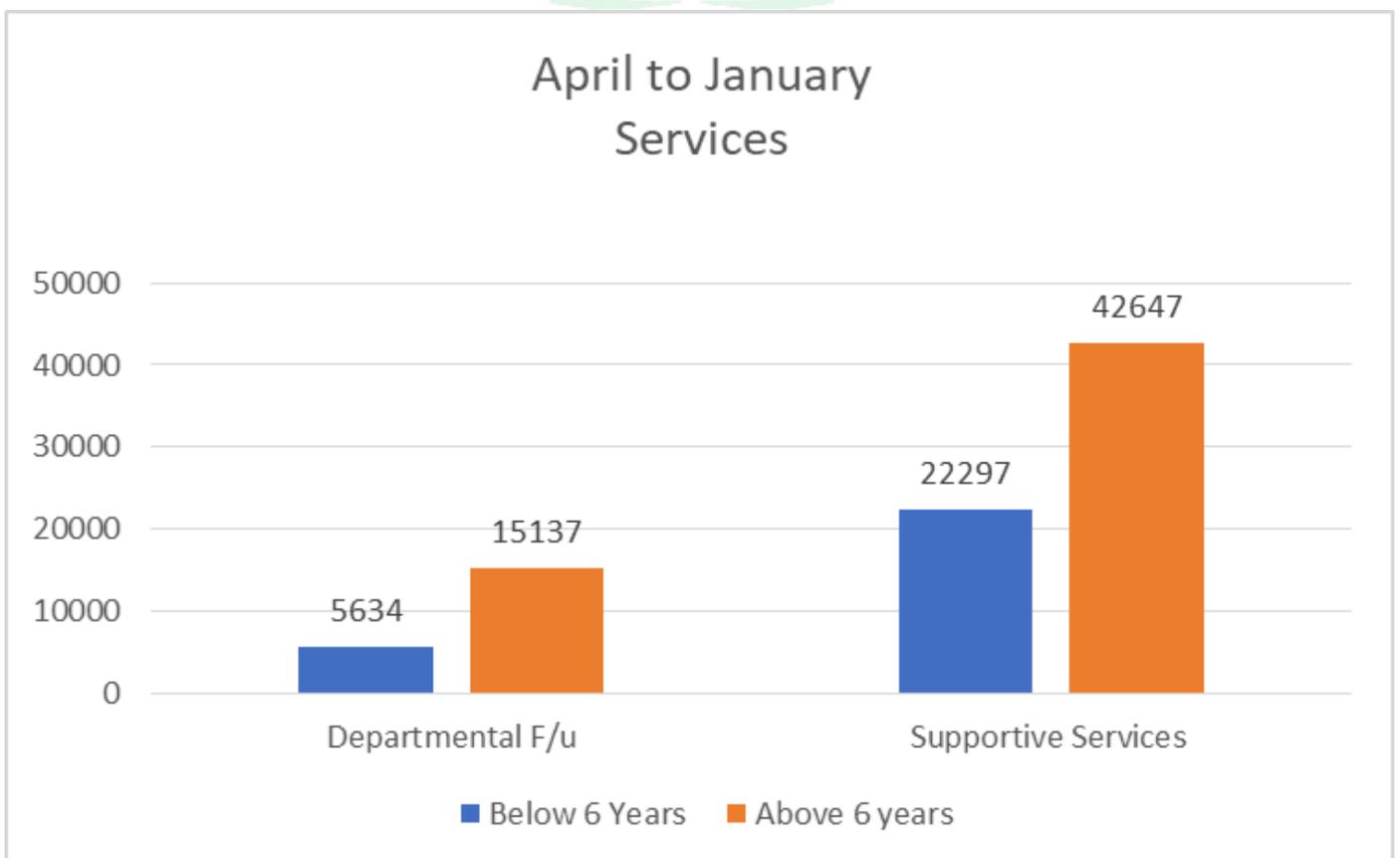
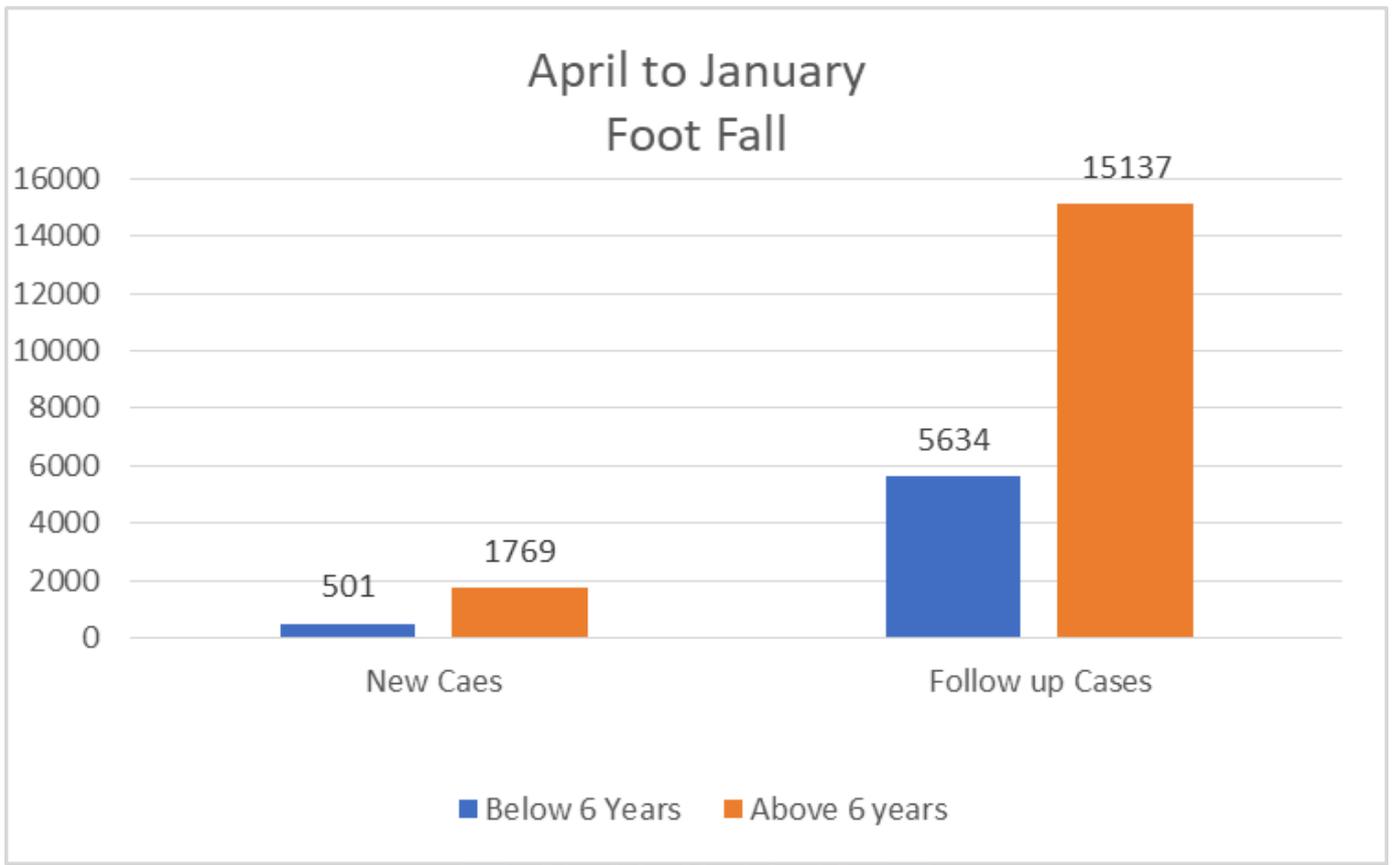
Malathi Krishnamurthy Holla

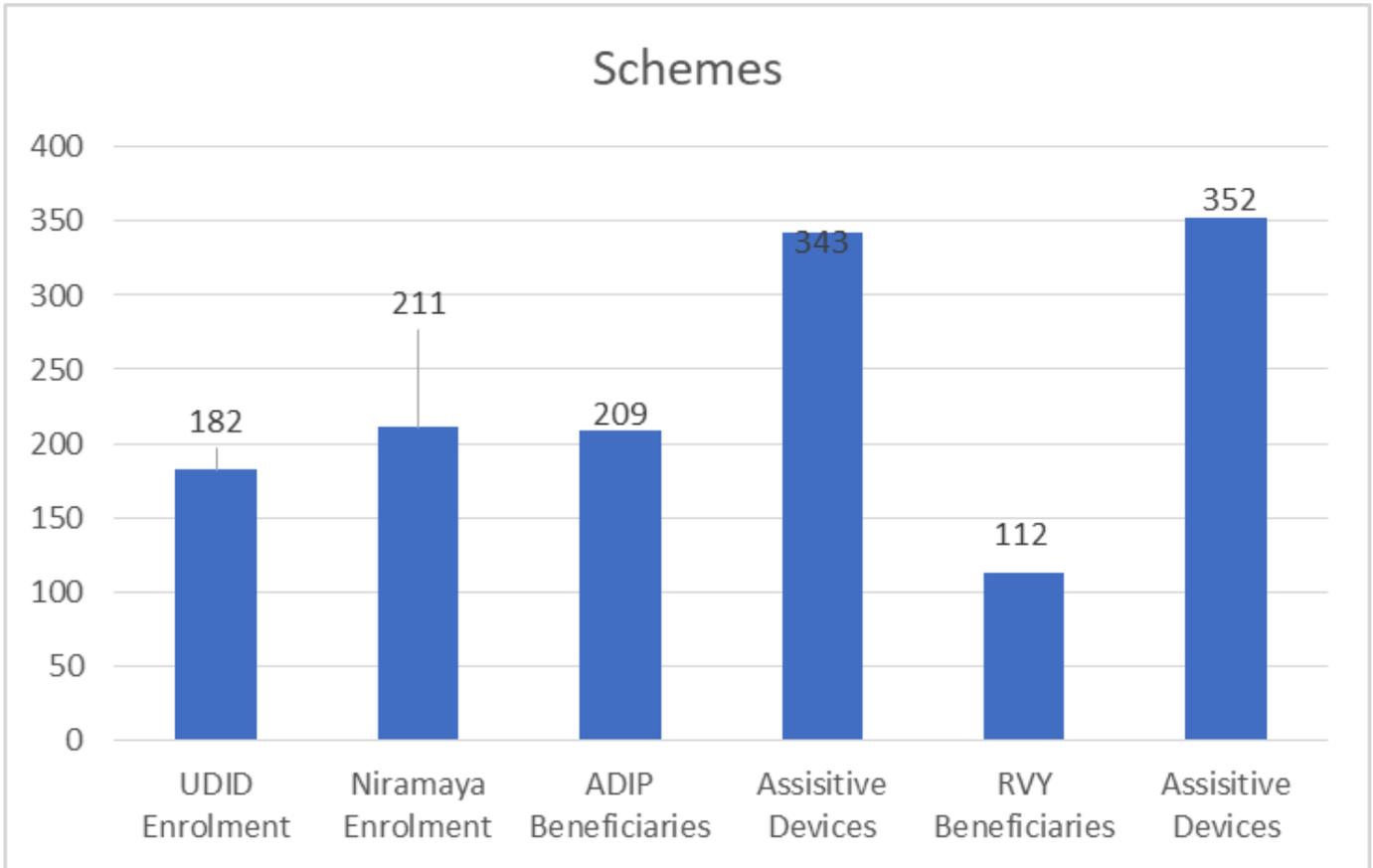


She got paralyzed completely at the tender age of one, after a high fever. She was under regular shock treatment for two years, that brought strengths to her upper body back, but below the waist her body remained weak. But, Malathi decided to accept it and to live life to the fullest. She chose sports as her career. Holla started participating in various games in college. She has taken part in various international events including the Para-Olympics. Holla won Gold in 200m, shot put, discus and javelin throw at the 1989 World Masters' Games in Denmark. She has won over 300 medals, and the proud recipient of the Arjuna Award and Padma Shri.



Achievements in 2025-26, till Jan 2026






Congratulations!

**The World's First
 Woman Amputee To
 Conquer Mount
 Everest, Arunima
 Sinha Gets
 Honourary
 Doctorate in UK For
 Her Inspirational
 Achievements.**

#MakingIndiaProud

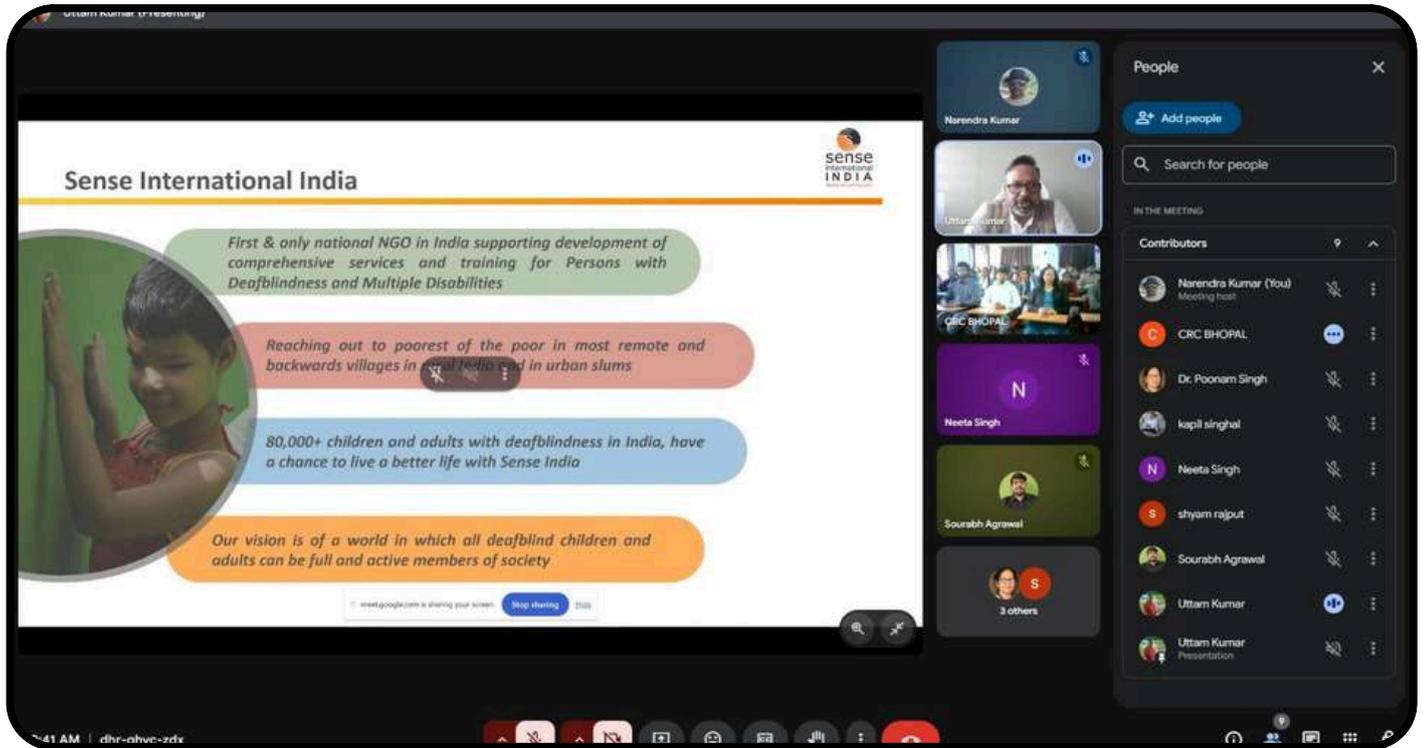
Academics



On 7 January 2026, CRC Bhopal and Barkatullah University, Bhopal signed an MoU to promote academic collaboration, joint research, and community outreach programs.



CRC Bhopal organized an educational and recreational exposure visit for students with intellectual disabilities enrolled in the PM DAKSH Assistant Plant Care Taker course (ID Batch-0449).



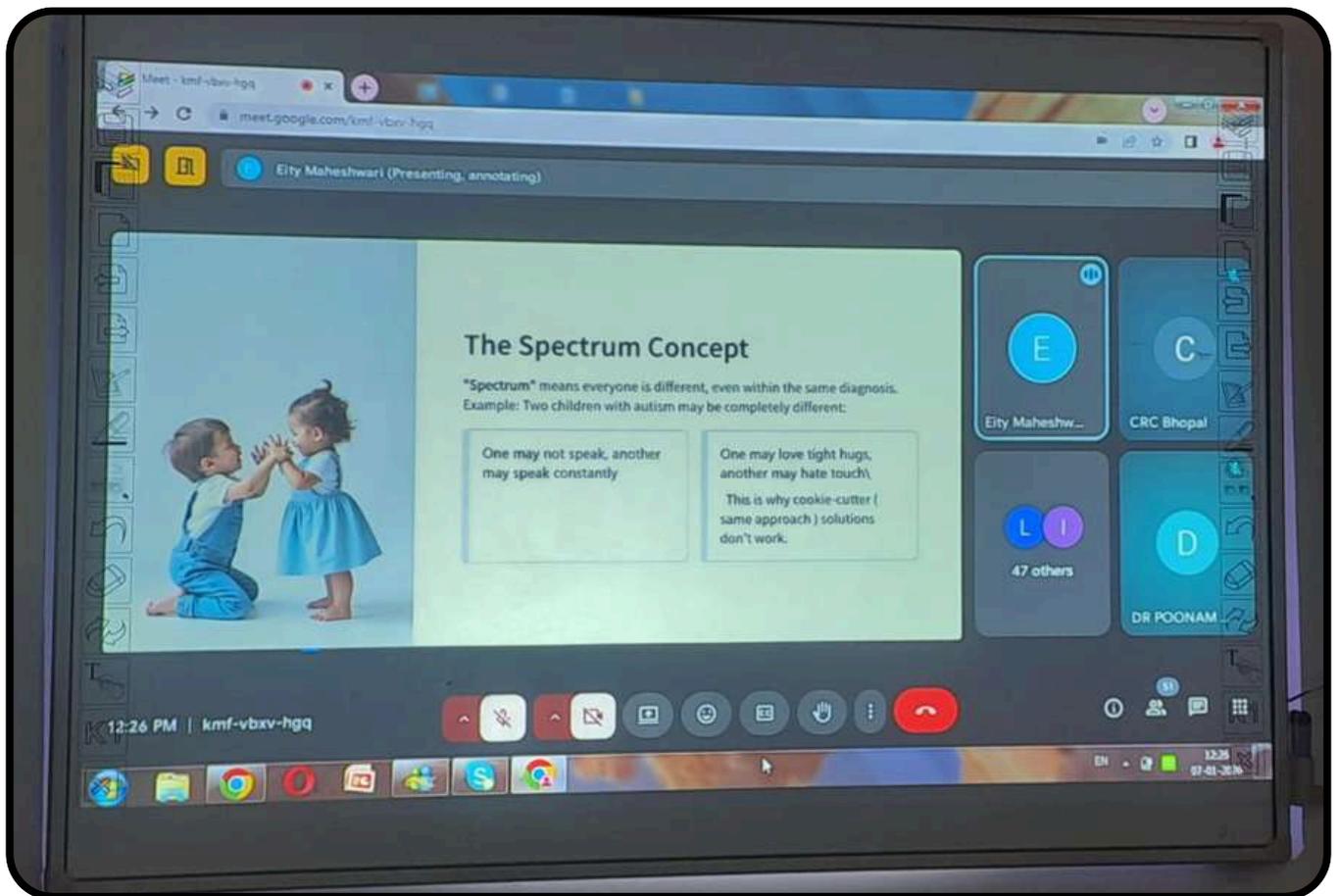
On 20 Jan 2026 an online interactive session was organized at CRC Bhopal with shri Uttam Kumar, CEO of Sense International India, to sensitize and educate students about Deafblindness.



20 to 21 January 2026, CRC Bhopal organized a Continuing Rehabilitation Education (CRE) program on “Creating an Inclusive Schools,”



On 23 January 2026, CRC Bhopal organized a quiz competition to commemorate 150 years of Vande Mataram, aiming to promote patriotism, cultural awareness, and intellectual development among students.



On 7 January 2026, CRC Bhopal in collaboration with Infiheal organized an online workshop on “Behaviour Challenges in Neurodivergent Children”

Community Sensitization and training Programme



On 5 January 2026, CRC Bhopal conducted an STTP for B.Sc. Nursing students at Rajiv Gandhi College of Nursing on the role of health professionals in early intervention for CWSN.

On 5 January 2026, CRC Bhopal organized a Braille Day awareness program at the hostel for children with special needs (DIET campus), Chhindwara, with the participation of education officials, teachers, parents, and students.



On 28 January 2026, CRC Bhopal organized a parent training program at Herman Minor School, Bhopal, on the theme “Early Identification: Helping Every Child Learn Better;”



On 9 January 2026, CRC Bhopal organized a parent training program at Madhuri Ayaam Educational and Welfare Committee, Bhopal, focusing on creating a supportive home environment for children with special needs

On 12 January 2026, CRC Bhopal actively participated in the Gyan Samvad-2.0 Principal Meet at SAM Global University, Bhopal, focused on the implementation of NEP-2020.



On 16 January 2026, CRC Bhopal in collaboration with Madhya Pradesh Bhoj (Open) University organized the first phase of a one-day training program at Jawaharlal Nehru Smriti Government Postgraduate College, Shujalpur, with participation from over 120 teachers, special educators, ASHA, Anganwadi, and panchayat workers.

On 17 January 2026, CRC Bhopal conducted disability awareness programs in government schools at Mandideep and Obedullaganj, Raisen, reaching students from classes 9 to 12.





On 21 January 2026, CRC Bhopal, in collaboration with Pratham, organized a workshop at Radiance Hotel, Bhopal on “Early identification and early intervention for children with Disabilities.”

On 30 January 2026, a short-term training program was successfully conducted at Hermann Gmeiner School, Bhopal. The program was designed to strengthen awareness and practical understanding of inclusive education, early identification of developmental concerns, and classroom management strategies for children with diverse learning needs.



On 30 January 2026, CRC Bhopal organized a parent training program at Sankalp Mookbadhir Special School, Narmadapuram, on the theme “Pre-verbal Skills in Language Development”

Awareness program



On 5 January 2026, CRC Bhopal, in collaboration with Kartikeya Educational & Welfare Society, Chhindwara, organized an awareness program on government schemes and facilities related to disability rehabilitation.

On 27 Jan 2026, CRC Bhopal conducted a mental and physical health awareness workshop for inmates at Central Jail, Ujjain, under the guidance of Director Dr. Narendra Kumar.



On 27 January 2026, CRC Bhopal conducted an awareness session at Government Navin Higher Secondary School, Khushipura Chandbad, Bhopal, where information about DISLI, D.Ed. (IDD), DHLS, and PGDRP courses was shared with students of classes 11 and 12.

On 27 January 2026, CRC Bhopal conducted an awareness session at Government Navin Higher Secondary School, Semra Kalan, Bhopal, where information regarding admission to DISLI, D.Ed. (IDD), DHLS, and PGDRP courses was shared with students of classes 11 and 12.





On 28 January 2026, under the guidance of Director Dr. Narendra Kumar, CRC Bhopal conducted awareness sessions in four government schools of Bhopal, providing information about DISLI, D.Ed. (IDD), DHLS, and PGDRP courses to students of classes 11 and 12.

On 28 January 2026, CRC Bhopal conducted an awareness session at Government Girls Higher Secondary School, Station Area, Bhopal, where information about DISLI, D.Ed. (IDD), DHLS, and PGDRP courses was shared with Class 12 students.



On 29 January 2026, CRC Bhopal conducted an awareness session at Government Sarojini Naidu Girls Higher Secondary School, Shivaji Nagar, Bhopal, where information about DISLI, D.Ed. (IDD), DHLS, and PGDRP courses



Badjhiri, Madhya Pradesh, India 🇮🇳
 90, Badjhiri, Madhya Pradesh 462044, India
 Lat 23.133629° Long 77.280411°
 Thursday, 29/01/2026 12:55 PM GMT +05:30

On 29 January 2026, CRC Bhopal conducted awareness sessions in multiple government schools of Bhopal, where information about DISLI, D.Ed. (IDD), DHLS, and PGDRP courses was shared with students.

On 29 January 2026, CRC Bhopal organized an outreach and awareness program across five higher secondary schools in Bhopal to promote admissions for the 2026–27 academic session in special education and disability rehabilitation courses.



Bhopal, Madhya Pradesh, India 🇮🇳
 Gupta Colony, 1, Ashok Vihar, Anandnagar, Bhopal, Madhya Pradesh 462022, India
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 Thursday, 29/01/2026 02:39 PM GMT +05:30



On 28 January 2026, the Composite Regional Centre for Skill Development, Rehabilitation & Empowerment of Persons with Disabilities (CRC) Bhopal organized a comprehensive awareness and rehabilitation program on the occasion of World Leprosy Day at Asha Gram Trust, Barwani.



Extended Services at Hamadia Hospital, GMC Bhopal

The CDEIC team of CRC-Bhopal conducts Half Day-weekly assessment and counseling sessions for children with special needs at the Pediatric Department (Neonatal Unit) of Hamidia Hospital, GMC Bhopal. Intervention services were provided to beneficiaries are as follows:

Date	No of Beneficiaries provided early intervention services
07/01/2026	6
21/01/2026	7
28/01/2026	8

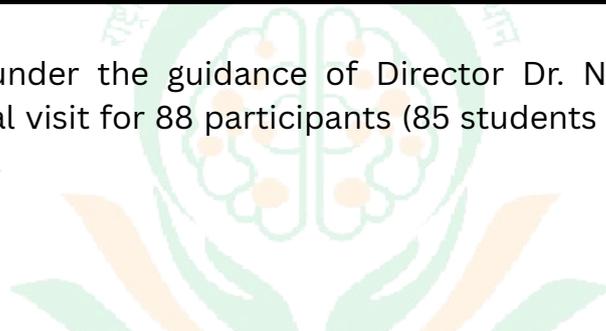


Other Activities

Visits



On 14 January 2026, under the guidance of Director Dr. Narendra Kumar, CRC Bhopal organized an educational visit for 88 participants (85 students and 3 faculty members) from Chirayu Nursing College.



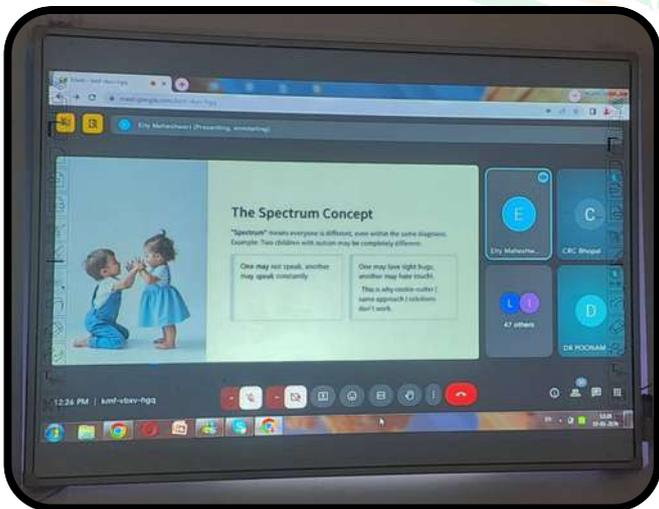
On 15 January 2026, under the guidance of Director Dr. Narendra Kumar, CRC Bhopal organized an educational visit for 27 participants (25 students and 2 faculty members) from Mahavir Institute of Medical Sciences and Research, Bhopal.

Other Activities



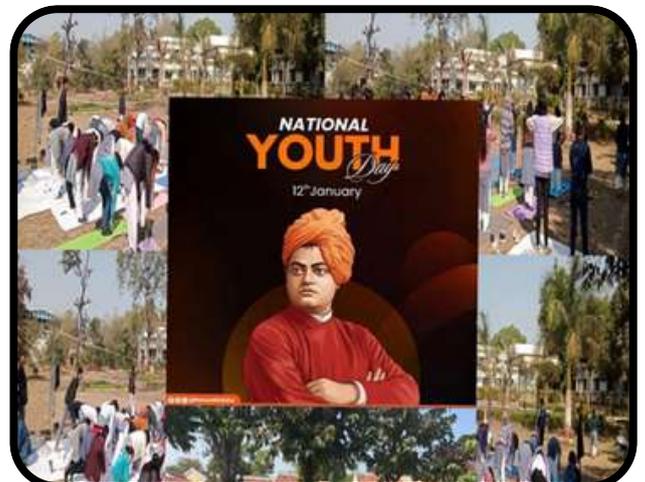
On 2 January 2026, the Composite Regional Centre for Skill Development, Rehabilitation and Empowerment of Persons with Disabilities (CRC) Bhopal organized a meaningful and inclusive program to commemorate World Braille Day, celebrating the birth anniversary of Louis Braille, the inventor of the Braille script.

On 5 January 2026, CRC Bhopal organized a visit and motivational interaction with students by Mrs. Raksha Dubey, Deputy Commissioner, State GST Department, Bhopal (Govt. of MP).



On 7 January 2026, CRC Bhopal in collaboration with Infiheal organized an online workshop on “Behaviour Challenges in Neurodivergent Children”

Celebrating National Youth Day at CRC Bhopal. On the birth anniversary of Swami Vivekananda, a yoga session was organized to promote physical fitness, mental well-being, and holistic development among youth.





On 14 January 2026, CRC Bhopal celebrated Makar Sankranti with a vibrant Kite Festival under the guidance of Director Dr. Narendra Kumar, graced by Hon'ble Minister Shri Vishvas Kailash Sarang as the Chief Guest.

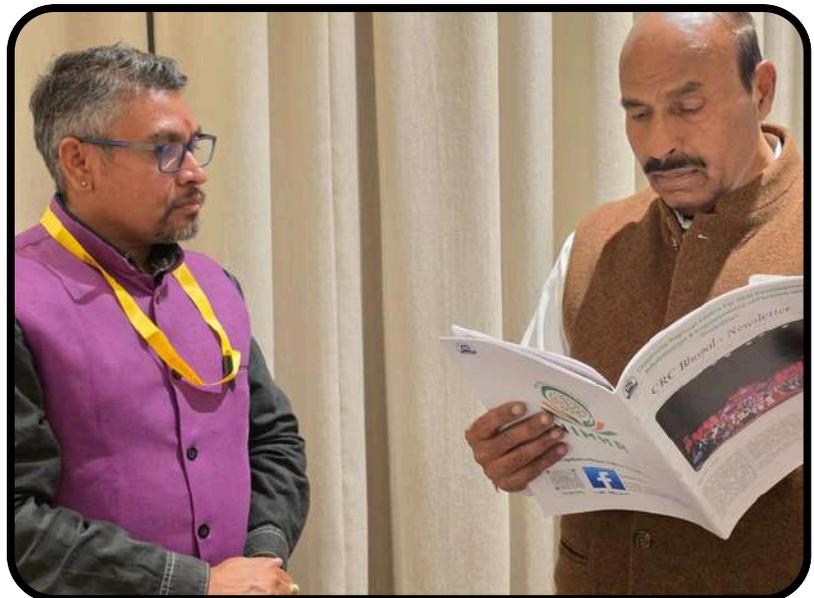
On 15 January 2026, CRC Bhopal organized a one-day workshop on "Sex Education for Children with Intellectual Disabilities,"



On the auspicious occasion of Saraswati Puja, may Goddess Saraswati bless us with wisdom, clarity, and creativity.



Welcoming Hon'ble Union Cabinet Minister Dr. Virendra Kumar, Ministry of Social Justice and Empowerment, in Bhopal was a moment of great pride.





CRC Bhopal celebrated Republic Day with a flag-hoisting ceremony by Chief Guest Shri C.P. Sharma, followed by cultural performances by students with disabilities, parents, and staff expressing patriotism, unity, and empowerment.

On 30 January 2026, under the guidance of Director Dr. Narendra Kumar, CRC Bhopal organized a Cyber Security Awareness Workshop to promote safe digital behavior and prevent cybercrime.



On 30th Jan 2026,, under the guidance of Director Dr. Narendra Kumar, CRC Bhopal organized an awareness program for ASHA workers at Asha Gram Trust, Barwani, focusing on early identification and early intervention for persons with disabilities.

Parent's Feedback

Date - 30/01/26

Rocky Reg No - 26368/25
 Mother Name - Humna

CRC पर जब हम आये थे तब मेरा बेटा 2 years 6 months का था और उसमें Speech, Understanding कुछ भी नहीं था। उस समय वो अपना नाम भी नहीं बताता था।
 Papa Mamma सबसे अनजान था।
 But यहाँ आने के बाद DR, C2. speech, occupational के बाद finally मेरा बेटा मुझे Mamma बोलता है।
 अपने पापा, बहन अब ज्यादा से ज्यादा लोग को पहचानता है।
 Reply देना speech वाली मेम को कुछ Tricks से बोलना

समझना सीख गया है।

Humna
 30/1/2026

Success Story

आभार सी.आर.सी भोपाल,

मेरा बेटा अनंत यादव जिल्ली आयु 6 वर्ष है वर्तमान में परन्तु वह दिनांक 07 फरवरी 2025 को मिराटर CRC जा रहा है यहां पर 3 लकी, स्पीच स्पेकल डेवेलपमेंट, Hyper Activity एवं अन्य कक्षाएं सिखारित की गई है 3 लकी पंजीयन क्रमांक 26092/25 है उसे पहले की लमछाएं थी जैसे- निर्देशों का पालन न करना, का ध्यान देना, आंखें भ्रमण कर बात नहीं करना, जुझारु करना, लीफ्ट गणी, आक्रमण व्यवहार, सामान को लोडना, झुटना, मारना सामाजिक समरसता में उभी व अन्य परेशानी थी,

परन्तु CRC भोपाल में थेरपी सिका शुरू किया था अब ले अब तक काफी परिवर्तन देखने में सिका और 3 लकी जीवन शैली में काफी बदलाव आया है सिका को अब स्वस्थ 3 लकी ISRD MISSION WORKSHOP सिका लक्ष्मी मिशन द्वारा LITTLE EXPLORER AWARDS एवं APPRECIATION CERTIFICATE प्राप्त किया है

अब अब भोपाल CRC के कोच और अनुभवी लोगों के द्वारा सिका को पाया आज में अपनी दिमागी गहराई को ले CRC BHOPAL को धन्यवाद एवं आभार प्रेषित करता हूँ।

स्थान - भोपाल

अभिभाकर
Jyada

डॉ. मंगल यादव

राजकीय कर्मचारी

दिनांक 26/02/25, भोपाल

978800191

Media Coverage

CWSN के प्रारंभिक हस्तक्षेप में नर्सिंग पेशेवरों की भूमिका पर शॉर्ट टर्म ट्रेनिंग कार्यक्रम का आयोजन



भोपाल। राजीव गांधी कलेज ऑफ नर्सिंग, भोपाल में विशेष आवश्यकता वाले बच्चों (CWSN) के प्रारंभिक हस्तक्षेप में स्वास्थ्य पेशेवरों की भूमिका विषय पर एक अल्पावधि प्रशिक्षण कार्यक्रम (STTP) का सफल आयोजन किया गया। यह कार्यक्रम महाविद्यालय के प्राचार्य श्री अनिल कलापरन के मार्गदर्शन में संपन्न हुआ। कार्यक्रम का आयोजन छद्म भोपाल द्वारा किया गया। कार्यक्रम की समन्वयक सुश्री अभिलाषा विश्वकर्मा (नर्सिंग ऑफिसर) रहीं। प्रशिक्षण सत्र

के संसाधन व्यक्ति श्री ऋषिकेश सापके (पुनर्वास मनोवैज्ञानिक) रहे। कार्यक्रम का शुभारंभ सरस्वती पूजन के साथ किया गया। इसके पश्चात श्री ऋषिकेश सापके द्वारा प्रारंभिक हस्तक्षेप (Early Intervention) के महत्व, विभिन्न स्वास्थ्य पेशेवरों की भूमिका, तथा विशेष आवश्यकता वाले बच्चों के समग्र विकास में बहुविषयक दृष्टिकोण पर विस्तृत एवं व्यवहारिक मार्गदर्शन प्रदान किया गया। प्रशिक्षण सत्र अत्यंत संवादात्मक एवं

सहभागितापूर्ण रहा, जिसमें नर्सिंग विद्यार्थियों ने सक्रिय रूप से भाग लिया। विद्यार्थियों ने प्रशिक्षण सत्र को अत्यंत ज्ञानवर्धक बताते हुए संसाधन व्यक्ति एवं आयोजकों का हृदय से आभार व्यक्त किया। यह प्रशिक्षण कार्यक्रम नर्सिंग विद्यार्थियों में विशेष आवश्यकता वाले बच्चों के प्रति संवेदनशीलता, समझ और व्यावसायिक दक्षता विकसित करने की दिशा में एक महत्वपूर्ण पहल सिद्ध हुआ।



दिव्यांगों को बनाएं आत्मनिर्भर



भास्कर न्यूज | प्रशासिका

सर्वोत्तम नगर में दिव्यांग जनों के लिए सरकारी योजनाएं एवं सुविधाएं विषय पर कार्यशाला का आयोजन हुआ। यहां दिव्यांगों के आत्मनिर्भर बनाने प्रेरित किया गया। कार्तिकेय एजुकेशन वेलफेयर सोसायटी के संचालक गौरव वाजपेई ने कहा कि दिव्यांगों में भी कई खूबियां होती हैं, जिसे तराशकर उन्हें अक्ल बना सकते हैं। समेकित क्षेत्रीय कौशल विकास, पुनर्वास और दिव्यांगजन

सशक्तिकरण केन्द्र- के अधिकारी सैयद मोहम्मद कुतुबुद्दीन नियाजी ने सरकार द्वारा संचालित योजनाओं की जानकारी देते हुए उसका लाभ उठाने प्रेरित किया। आभा मिश्रा ने अभिभावकों को बच्चों की शिक्षा तथा गृह आधारित प्रशिक्षण पर जानकारी दी। जागरूकता समन्वयक श्याम सिंह ने ब्रेल दिवस के विषय में बताते हुए अभिभावकों की समस्या से संबंधित सवालों के जबाब दिया। अरवि वाजपेई ने आभार व्यक्त किया।

बाह्य पहुँच कार्यक्रम के तहत छिंदवाड़ा में दिव्यांगजनों हेतु सरकारी योजनाओं पर जागरूकता कार्यक्रम आयोजित

संभाग ब्यूरो धीरेन्द्र सिंह छिंदवाड़ा

छिंदवाड़ा। समेकित क्षेत्रीय कौशल विकास, पुनर्वास एवं दिव्यांगजन सशक्तिकरण केंद्र (सीआरसी) भोपाल एवं कार्तिकेय एजुकेशनल एंड वेलफेयर सोसाइटी, छिंदवाड़ा के संयुक्त तत्वावधान में बाह्य पहुँच कार्यक्रम के अंतर्गत दिव्यांगजनों के पुनर्वास से जुड़ी सरकारी योजनाएं एवं सुविधाएं विषय पर एक जागरूकता कार्यक्रम का आयोजन दिनांक 5 जनवरी 2026 को किया गया। कार्यक्रम की शुरुआत कार्तिकेय एजुकेशनल एंड वेलफेयर सोसाइटी, छिंदवाड़ा के संचालक श्री गौरव बाजपेई द्वारा संस्था के उद्देश्यों एवं दिव्यांगजनों के लिए किए जा रहे कार्यों की जानकारी के साथ की गई। इसके पश्चात सीआरसी भोपाल के पुनर्वास अधिकारी श्री सैयद मोहम्मद कुतुबुद्दीन नियाजी ने केंद्र एवं राज्य सरकार द्वारा संचालित दिव्यांगता पुनर्वास से संबंधित विभिन्न योजनाओं, सुविधाओं एवं उनके लाभों की विस्तृत जानकारी दी। कार्यक्रम में केंद्र की व्याख्याता (विशेष शिक्षा) श्रीमती आभा मिश्रा ने अभिभावकों को दिव्यांग बच्चों की शिक्षा, विशेष शिक्षण पद्धतियों एवं गृह आधारित प्रशिक्षण के महत्व पर मार्गदर्शन दिया। वहीं जन जागरूकता समन्वयक श्री श्याम सिंह मेवाडा ने ब्रेल दिवस के महत्व पर प्रकाश डालते हुए अभिभावकों द्वारा पूछे गए प्रश्नों एवं समस्याओं का समाधान किया। इस अवसर पर कार्तिकेय एजुकेशनल एंड वेलफेयर सोसाइटी के अध्यक्ष श्री गौरव बाजपेई, संचालिका श्रीमती अरवि बाजपेई सहित बड़ी संख्या में अभिभावक, दिव्यांग बच्चे एवं शिक्षक उपस्थित रहे। कार्यक्रम का उद्देश्य दिव्यांगजनों को उनके अधिकारों एवं सरकारी सुविधाओं के प्रति जागरूक कर सशक्त बनाना रहा।

दिव्यांगजन सशक्तिकरण के लिए 100 प्रतिनिधियों को दिया प्रशिक्षण

उपकरण व रोजगार देने बनेंगे सहायक

भास्कर संवाददाता | राजलपुर

समेकित क्षेत्रीय कौशल विकास, पुनर्वास एवं दिव्यांगजन सशक्तिकरण केंद्र (सीआरसी) भोपाल द्वारा शुक्रवार को राजलपुर में दिव्यांग सेवा को लेकर प्रशिक्षण कार्यक्रम आयोजित किया गया।

प्रशिक्षण में शिक्षक, सरपंच, सचिव और सामाजिक संस्था प्रतिनिधियों सहित करीब 100 लोगों ने भाग लिया। कार्यक्रम का उद्देश्य दिव्यांगता की पहचान, दिव्यांगजन के लिए उपलब्ध शासकीय योजनाओं का लाभ दिलाने की प्रक्रिया तथा प्लेसमेंट और स्वरोजगार के माध्यम से दिव्यांगजन को आत्मनिर्भर बनाना रहा। प्रशिक्षण में विशेषज्ञों ने दिव्यांगता की पहचान, उपचार, आवश्यक उपकरण उपलब्ध कराने, स्वरोजगार और रोजगार से जोड़ने की जानकारी दी। बताया गया कि दिव्यांगजन को समाज की मुख्यधारा से जोड़ने के लिए संस्थाओं और विभिन्न वर्गों का सहयोग जरूरी है। आगामी दिनों में दिव्यांगजनों का चिन्हकन कर उन्हें उपकरण और रोजगार उपलब्ध कराने की योजना



प्रशिक्षण में जानकारी देते हुए अतिथि।



कार्यक्रम में कई प्रतिनिधि हुए शामिल।

राजलपुर जनपद पंचायत के निर्देशानुसार आयोजित हुआ, जिसमें सीआरसी सेंटर भोपाल और भोज मुक्त विश्वविद्यालय का सहयोग रहा। प्रशिक्षण सत्र को इंद्र सिंह परमार, भोज मुक्त विश्वविद्यालय के विभागाध्यक्ष कौशलेंद्र कुमार और सीआरसी सेंटर की असिस्टेंट प्रो. श्रुति कुमर ने संबोधित किया। उच्च शिक्षा सचिव इंद्र सिंह परमार ने इस

प्रमाणपत्र बनाना ही दिव्यांग कल्याण नहीं है। दिव्यांगजन को आत्मनिर्भर बनाकर रोजगार सुलभ कराना सरकार और समाज की संयुक्त जिम्मेदारी है। उन्होंने बताया कि राजलपुर और आसपास के दिव्यांगजनों को रोजगार से जोड़ने के लिए निःशुल्क प्रशिक्षण, प्लेसमेंट और स्वरोजगार देने की नीति सरकार ने

पुनर्वास शिक्षा पर कार्यशाला

भोपाल. समेकित क्षेत्रीय कौशल विकास पुनर्वास एवं दिव्यांगजन सशक्तिकरण केंद्र (सीआरसी) खजुरी में समावेशी विद्यालय निर्माण विषय पर दो दिवसीय सतत पुनर्वास शिक्षा पर कार्यशाला का आयोजन किया गया। कार्यशाला में 34 प्रतिभागियों ने भाग लिया। पहले दिन 'विविधता और समावेशन' विषय पर मोहम्मद कलीम सिद्दीकी ने अपनी बात रखी। दूसरे दिन 'समावेशित विद्यालय के निर्माण की चुनौतियों और समावेशित विद्यालय के निर्माण के उपाय' विषय पर डॉ. याचना सक्सेना एस, एस महाविद्यालय ने जानकारी दी।



Article by Faculty

Acoustic Schwannoma (Vestibular Schwannoma):

By- Mr. K.K. Verma (Assistant Professor (Speech & Hearing))

A Research Overview

Abstract

Acoustic schwannoma, also known as vestibular schwannoma, is a benign, slow-growing tumor arising from the Schwann cells of the vestibular division of the eighth cranial nerve. Although non-malignant, its location within the internal auditory canal and cerebellopontine angle can lead to significant audiological, vestibular, and neurological morbidity due to compression of adjacent neural and vascular structures. Most tumors are unilateral and sporadic; however, bilateral involvement is strongly associated with neurofibromatosis type 2 (NF2). Common clinical manifestations include unilateral sensorineural hearing loss, tinnitus, and balance disturbances, with symptom severity largely dependent on tumor size and growth rate. Diagnosis is primarily established using magnetic resonance imaging with gadolinium contrast, supported by audiological and electrophysiological findings such as abnormal auditory brainstem responses. Management is individualized and includes observation, surgical resection, stereotactic radiotherapy, and comprehensive audiological rehabilitation aimed at preserving hearing and quality of life. Advances in molecular biology, imaging, radiotherapy techniques, and auditory rehabilitation continue to improve treatment outcomes and long-term prognosis for affected individuals.

1. Introduction

Tumors affecting the eighth cranial nerve are commonly referred to as eighth nerve tumors, acoustic neuromas, acoustic neurilemmomas, acoustic neurinomas, or acoustic tumors. However, the technically preferred term is vestibular schwannoma, because the majority of eighth cranial nerve tumors arise from the Schwann cells of the vestibular division of the nerve rather than from its auditory branch (NIH, 1991). Although these terms are often used interchangeably in the literature, it is important to recognize that the vestibular branch is usually the primary site of origin. Acoustic schwannomas are slow-growing tumors originating from the Schwann cells that myelinate the vestibulocochlear nerve (cranial nerve VIII), primarily affecting the vestibular portion. First described in detail in the late nineteenth century, these tumors represent a unique intersection of neurosurgery, otolaryngology, audiology, and neuro-oncology due to their anatomical location and clinical impact.

These tumors may arise anywhere along the course of the eighth cranial nerve, either within the internal auditory meatus or medial to it within the cerebellopontine angle (CPA). Acoustic tumors that are located within or expand into the CPA are often referred to as cerebellopontine angle tumors or posterior fossa tumors. Tumors arising within the internal auditory canal frequently erode the bony walls of the canal as they enlarge and commonly extend medially into the CPA, which represents the path of least resistance. As tumor growth progresses, the eighth cranial nerve becomes compressed, deformed, and displaced. Tumor-related pressure may also compromise the blood supply to the cochlea, which likely explains why many patients with retrocochlear pathology demonstrate cochlear-type audiological findings, such as loudness recruitment. With increasing size, pressure may also be exerted on adjacent cranial nerves—particularly the facial nerve (cranial nerve VII) and the trigeminal nerve (cranial nerve V)—and in advanced cases may result in brainstem displacement, leading to potentially life-threatening consequences despite the benign nature of the tumor.



2. Epidemiology

Acoustic schwannomas account for approximately 8% of all intracranial tumors and about 80–90% of cerebellopontine angle (CPA) tumors. Incidence is approximately 1 per 100,000 persons per year, with most cases occurring in adults aged 30–60 years. Both sexes are affected, with a slight female predominance reported in several series. Vestibular schwannomas are relatively uncommon, with modern prevalence estimates ranging from as low as ~ 0.001% (Tos, Stangerup, Cayé-Thom asen, Tos, & Thomsen 2004) to between roughly 0.02% (Lin, Hegarty, Fischbein, & Jackler 2005) and 0.07% (Anderson, Loevner, Bigelow, & Mirza 2000). They can occur anywhere along the eighth nerve, either within the internal auditory meatus or medial to it in the cerebellopontine angle. The great majority of them are unilateral. However, ~ 5% of them are bilateral and are associated with a genetic syndrome called neurofibromatosis type 2. Acoustic tumors located in (or expanding into) the CPA are also called cerebellopontine angle or posterior fossa tumors.

While most cases are sporadic and unilateral, bilateral acoustic schwannomas are a hallmark of neurofibromatosis type 2 (NF2) a hereditary condition caused by biallelic inactivation in the NF2 gene.

3. Pathophysiology

Bilateral vestibular schwannomas are strongly associated with neurofibromatosis, a hereditary disorder that exists in two genetically and clinically distinct forms: neurofibromatosis type 1 (NF1) and neurofibromatosis type 2 (NF2).

Neurofibromatosis Type 1 (NF1), also known as von Recklinghausen's disease, is an autosomal dominant disorder associated with mutations on chromosome 17. NF1 is characterized primarily by cutaneous and systemic manifestations rather than eighth nerve tumors. (Stanley A. Gelfand 2016)

Neurofibromatosis Type 2 (NF2) is an autosomal dominant disorder associated with mutations of the NF2 gene on chromosome 22. According to NIH (1991), a diagnosis of NF2 is established by the presence of any of the following:

Bilateral eighth cranial nerve (vestibular) tumors

Having a parent/sibling/child with NF2 and either a unilateral eighth-nerve tumor

Any one of the following tumors or ocular findings:

Neurofibroma

Meningioma

Glioma

Schwannoma

Posterior subcapsular cataract or early-onset lens opacity

4. Clinical Presentation

The presenting complaints of patients with vestibular schwannomas vary widely and depend largely on tumor size, growth rate, and anatomical location. Although dramatic neurological deficits are described in older literature, these are now less common due to earlier detection with modern imaging techniques. The most frequent presenting symptom is a unilateral hearing disturbance, which is typically slowly progressive but may occasionally be sudden in onset. Other common symptoms include:



- Tinnitus
- Dizziness
- Facial numbness
- Gait disturbances
- Headaches
- balance disturbances.

Although these tumors most commonly arise from the vestibular branch of the nerve, hearing loss is the predominant complaint. This apparent paradox is most likely explained by central vestibular compensation, which can mask slowly developing vestibular dysfunction. Audiometric findings vary considerably. While the majority of patients demonstrate some degree of high-frequency sensorineural hearing loss, virtually any audiometric configuration may be observed, ranging from normal thresholds to profound sensorineural hearing loss.

5. Diagnosis

Definitive diagnosis of acoustic schwannomas relies on magnetic resonance imaging (MRI) with gadolinium contrast, which typically demonstrates an enhancing lesion within the internal auditory canal and/or cerebellopontine angle. Audiological evaluation carried out to reveal the acoustic schwannoma with the help of test battery approach like: PTA, Speech Audiometry and electrophysiological test to find out site of lesion involvement.

Audiological evaluation commonly reveals:

- Asymmetric sensorineural hearing loss
- Poor speech discrimination disproportionate to pure-tone thresholds
- Abnormal auditory brainstem response (ABR) findings (Prolonged absolute latency of Wave V) in the affected ear
- Absent or elevated acoustic reflexes.

While physiological audiological tests are valuable for identifying retro cochlear involvement, MRI with gadolinium contrast is the gold standard for diagnosis, revealing enhancing lesions in the internal auditory canal or cerebellopontine angle.

6. Management

Management of acoustic schwannomas is individualized and depends on tumor size, growth rate, patient age, hearing status, symptoms, and overall medical condition. Treatment options include surgical resection, radiotherapy and Audiological Management.

6.1 Surgical Management

Surgical excision remains a traditional treatment option and may be performed using several approaches:

- Retrosigmoid (suboccipital) approach, suitable for both small and large tumors
 - Middle fossa approach, primarily for small tumors with serviceable hearing, offering the possibility of hearing preservation
 - Translabyrinthine approach, an otologic approach through the temporal bone that provides excellent facial nerve visualization but results in complete hearing loss on the operated side.
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6.2 Radiotherapy

Stereotactic radiosurgery, using Gamma Knife or linear accelerator technologies, provides an alternative for patients who are not surgical candidates or who decline surgery. Although some controversy remains, extensive clinical experience supports its effectiveness in tumor growth control.

6.3 Audiological Management strategies include:

- Regular hearing assessments to monitor progression
- Hearing aids for residual hearing
- Contralateral routing of signal (CROS/BiCROS) systems for unilateral deafness
- Bone-conduction devices and cochlear implants in selected cases
- Auditory rehabilitation and counseling to improve communication and quality of life

Preservation of hearing becomes especially important when the contralateral ear already has significant hearing impairment.

7. Prognosis and Complications

The overall prognosis for vestibular schwannomas is generally excellent, reflecting their benign nature and slow rate of growth. With timely diagnosis and appropriate management, most patients can achieve favorable outcomes. However, potential complications may still occur, including permanent hearing loss, facial nerve dysfunction, chronic balance disturbances, and persistent tinnitus. In rare cases, radiation-induced neuropathy can develop following radiotherapy. Advances in early detection and modern imaging techniques have significantly reduced the incidence of severe neurological complications, allowing for more effective intervention and preservation of both neurological and audiological function.

8. Conclusion and Future Directions

Acoustic schwannomas are benign, slow-growing tumors of the vestibulocochlear nerve that can nonetheless result in substantial audiological, vestibular, and neurological morbidity due to their proximity to critical neurovascular structures. Early detection and accurate diagnosis have significantly improved clinical outcomes, allowing for timely intervention and preservation of neurological function. Optimal management requires a multidisciplinary approach that integrates neurosurgical, otologic, radiological, audiological, and rehabilitative expertise. Treatment strategies must be individualized, balancing tumor control with preservation of hearing, facial nerve function, and overall quality of life. Audiological management and long-term rehabilitation play a pivotal role in maximizing functional outcomes, particularly in patients with residual or unilateral hearing loss.

Future directions in the management of acoustic schwannomas are increasingly focused on molecular-targeted therapies, refinements in stereotactic radiotherapy, and continued advances in hearing rehabilitation technologies, including cochlear implants and other implantable auditory devices. Improved understanding of tumor biology, particularly NF2-related pathways, holds promise for less invasive and more personalized treatment strategies. Collectively, these developments aim not only to enhance tumor control but also to improve long-term functional outcomes and quality of life for affected individuals.

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Review of Literature

Conformity: Why We Follow the Crowd and What It Means for the World

By- Urvashi Garg (PGDRP Student)

Abstract-

Have you ever worn something or said something just to fit in? That's conformity- Conformity is a powerful social psychological process that influences human thoughts, behaviors, and decision-making. It refers to the tendency of individuals to change their attitudes, opinions, or actions to align with group norms. This phenomenon plays a significant role in maintaining social order and harmony but can also lead to negative outcomes such as loss of individuality, groupthink, and blind obedience. Drawing on classical and contemporary psychological theories, this review examines the types of conformity, underlying social influences, and key empirical studies. Evidence from cross-cultural and experimental research highlights how conformity shapes cognition, memory, and moral judgment. The review further discusses the benefits and dangers of conformity, especially in the digital age, where social media intensifies social influence. Understanding conformity is essential for balancing social belonging with independent thinking in modern society.

Introduction -

Conformity is a fundamental aspect of human social behavior. It occurs when individuals adjust their thoughts, behaviors, or appearance to match those of a group. From childhood peer interactions to adult workplace decisions, conformity continuously shapes human conduct. The desire to belong, avoid rejection, and seek social approval makes individuals vulnerable to group influence. Herbert Kelman (1958) identified three major processes of conformity: compliance, identification, and internalization. Compliance involves public agreement without private acceptance, often to avoid punishment or gain rewards. Identification occurs when individuals adopt behaviors to establish or maintain a relationship with a group or admired person. Internalization represents the deepest form of conformity, where group beliefs are genuinely accepted as one's own. Deutsch and Gerard (1955) further explained conformity through normative social influence, driven by the need for social acceptance, and informational social influence, based on the desire to be correct in uncertain situations. In everyday life, conformity is evident in fashion choices, language use, social media trends, and political opinions.

While conformity promotes coordination and social harmony, excessive conformity can suppress individuality and critical thinking.

Review of Studies and Evidence-Based Findings

1. Classical and International Research-

One of the most influential studies on conformity was conducted by Solomon Asch (1951). In his line judgment experiment, participants were asked to identify the correct line length while surrounded by confederates who deliberately gave incorrect answers. The results showed that nearly 75% of participants conformed at least once, even when the correct answer was obvious. This study demonstrated the power of group pressure in shaping individual judgment.



Deutsch and Gerard (1955) expanded understanding by distinguishing between normative and informational social influences. Their findings revealed that individuals conform not only to gain acceptance but also to seek guidance in ambiguous situations. This framework remains central to social psychology.

A large-scale meta-analysis by Bond and Smith (1996) examined Asch-type conformity studies across cultures. The researchers found that conformity levels were significantly higher in collectivist societies, such as India and Japan, where social harmony and group cohesion are valued. In contrast, individualistic cultures showed lower conformity levels.

From an evolutionary perspective, García and Traulsen (2014) argued that conformity supports group survival by promoting cooperation and shared norms. Their research suggested that conformist transmission helps stabilize social behavior in uncertain environments.

Eisenstadt and Leippe (1994) explored the cognitive effects of conformity and found that social influence could distort memory. Participants were more likely to accept false memories when those memories were endorsed by peers, highlighting conformity's impact on belief formation and cognition.

2. Conformity in Organizations and the Digital Age-

Conformity also plays a critical role in group decision-making. Wittenbaum and Hollingshead (1996) demonstrated that excessive conformity in groups can lead to groupthink, where dissenting opinions are suppressed to maintain consensus. This can result in poor decisions and ethical failures.

Robert Cialdini (2001) introduced the concept of social proof, explaining how individuals rely on others' behavior to determine what is correct. In the digital age, social proof is amplified through likes, shares, online reviews, and viral trends. Social media platforms accelerate conformity by rapidly spreading opinions and behaviors, influencing public attitudes on a massive scale.

Discussion and Implications-

The reviewed literature clearly shows that conformity is neither entirely positive nor entirely negative. On the positive side, conformity promotes social order, cooperation, cultural continuity, and shared identity. It helps individuals learn social norms and function effectively within groups.

However, excessive conformity can lead to serious consequences, including loss of individuality, moral disengagement, misinformation, and herd behavior. Historical events, political propaganda, financial bubbles, and online misinformation demonstrate how conformity can override ethical judgment and critical thinking.

In the modern digital world, conformity spreads faster and more widely than ever before. Awareness of social influence mechanisms is therefore essential for developing psychological resilience and independent judgment.



Conclusion -

Conformity is a powerful psychological force that shapes human behavior across cultures and contexts. Research evidence demonstrates that individuals conform due to social pressure, desire for accuracy, and the need for belonging. While conformity supports social harmony and cooperation, unchecked conformity can suppress independent thinking and ethical responsibility.

Developing awareness about conformity enables individuals to strike a balance between social belonging and personal autonomy. True psychological maturity lies in knowing when to align with the group and when to stand apart. As Rita Mae Brown aptly stated,

“The reward for conformity is that everyone likes you except yourself.”

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Know our Team Member



Dr. Prateek Kumar Vinduwa (Lecturer in Physiotherapy)

Dr. Prateek Kumar Vinduwa (PT) is a highly motivated and accomplished physiotherapy professional with specialized expertise in Neurology and Orthopaedics. He completed his Bachelor of Physiotherapy from Mahatma Gandhi Memorial Medical College and went on to earn his Master of Physiotherapy in Neurology from Chaudhry Charan Singh University, where he demonstrated outstanding academic performance and was awarded the Gold Medal during his post-graduation.

Dr. Vinduwa's academic background is complemented by his strong clinical orientation, enabling him to integrate theoretical knowledge with practical application effectively. His core areas of clinical interest include neurological rehabilitation, motor control and recovery, stroke rehabilitation, neuroplasticity-based interventions, as well as the assessment and management of orthopedic conditions affecting functional mobility and quality of life.

As an educator, Dr. Vinduwa believes in a student-centered and evidence-based teaching philosophy. He emphasizes critical thinking, clinical reasoning, and hands-on learning to prepare students for real-world clinical challenges. His teaching approach encourages active participation, continuous learning, and the ethical practice of physiotherapy, with a strong focus on patient-centered care.

Dr. Prateek Kumar Vinduwa is committed to academic excellence, clinical competency, and professional development. Through his dedication to teaching and clinical practice, he continues to inspire students and contribute meaningfully to the field of physiotherapy.

Know our Department

The Cross-Disability Early Intervention Centre (CDEIC)

The Cross-Disability Early Intervention Centre (CDEIC) is a specialised multidisciplinary centre established under the Department of Empowerment of Persons with Disabilities (DEPwD), Ministry of Social Justice and Empowerment, Government of India to support young children (0–6 years) with or at risk of developmental delays and disabilities. Launched in June 2021 with the inauguration of 14 centres at national and regional institutes nationwide, CDEICs provide early identification, therapeutic and rehabilitative services such as speech therapy, physiotherapy, occupational therapy, special education, clinical psychology, parental counselling, and school-readiness support –all under one roof to improve developmental outcomes and foster inclusion.

CDEIC Entrance



Feeding Room



Occupational Therapy



Physiotherapy



Special Education



Nursing



Rehabilitation Psychology



Student's Contribution

आशा की किरण -
Ray of Hope -

Disability is not weakness,
It's a different kind of strength.
It teaches us to struggle,

And overcome every difficulty.

We have to turn our

disability into an opportunity,

And work towards

Achieving our goals.

We must not give up,

And fulfill our dreams!

दिव्यांगता नहीं है कमजोरी

यह तो एक अलग ही शक्ति है।

जो हमें सिखाती है अंधर्व करना

और हर मुश्किल को पार करना।

हमें अपनी दिव्यांगता को एक अवसर बनाना है

और अपने लक्ष्यों को प्राप्त

करने के लिए काम करना है।

हमें हार नहीं माननी है,

और अपने सपनों को पूरा करना है,

Prachi chaturvedi
Died II year



Let us know

Railway Concession Scheme for Persons with Disabilities

The Indian railway provides concession to the Persons with Disabilities in travelling by train in the following manner.

S.No Category of disability Percentage element of concession

I Persons with Disabilities(Divyangjan)

1 **Orthopaedically Handicapped/ Paraplegic persons. who cannot travel without escort-for any purpose -- 75% in 2nd class, SL, 1st class, 3AC, AC chair car

-- 50% in 1AC and 2 AC

-- 25% in 3AC & AC Chair Car of Rajdhani/Shatabdi trains

-- 50% in MST & QST

-- One escort is also eligible for same element of concession

2 **Persons with Intellectual Disability who cannot travel without an escort-for any purpose(w.e.f 01-06-2025).

3 Persons with Blindness travelling alone or with an escort - for any purpose, where "Blindness" means a condition where a person has any of the following conditions, after best correction—

- (i) Total absence of sight; or
- (ii) Visual acuity less than 3/60 (or less than 10/200) by Snellen's chart in better eye with best possible corrections; or
- (iii) Limitation of field of vision subtending an angle of less than 10 degree in better eye

Equivalent to visual impairment of 90% and above

4 Persons with hearing and speech impairment totally (both afflictions together in the same person) travelling alone or with an escort-for any purpose. -- 50% in 2nd class, SL, 1st class

-- 50% in MST & QST

-- One escort is also eligible for same element of concession

Source: <https://www.indianrail.gov.in/>



समेकित क्षेत्रीय कौशल विकास, पुनर्वास एवं दिव्यांगजन सशक्तिकरण केंद्र (सी.आर.सी.) भोपाल
(राष्ट्रीय मानसिक स्वास्थ्य पुनर्वास संस्थान सीहोर, म. प्र. के प्रशासनिक नियंत्रणाधीन)
दिव्यांगजन सशक्तिकरण विभाग, सामाजिक न्याय और अधिकारिता मंत्रालय, भारत सरकार

कुष्ठ रोग: भारत में कलंक से सहयोग तक

अतीत में भारत में कुष्ठ रोग को लेकर अनेक भ्रांतियाँ और भय व्याप्त थे। इससे प्रभावित व्यक्तियों को अक्सर अछूत माना जाता था और समाज से अलग-थलग कर दिया जाता था।

आज यह सोच बदल चुकी है-कुष्ठ रोग एक पूर्णतः उपचार योग्य बीमारी है।

कुष्ठ रोग क्या है ?

कुष्ठ रोग (हैन्सेन रोग) एक दीर्घकालीन संक्रामक बिमारी है जो जीवाणु से होती है। यह मुख्य रूप से प्रभावित करता है :-

प्रथम उपचार कदम:

समय पर पहचान (शीघ्र निदान) और भारत सरकार द्वारा निःशुल्क प्रदान की जाने वाली मल्टी-ड्रग थेरेपी (MDT) से कुष्ठ रोग पूरी तरह ठीक किया जा सकता है तथा विकलांगता को रोका जा सकता है।

कुष्ठ रोग से उत्पन्न विकलांगता को अब दिव्यांगजन अधिकार अधिनियम के अंतर्गत मान्यता दी गई है।

इसी उद्देश्य से समग्र क्षेत्रीय केंद्र (Composite Regional Centers - CRCs) स्थापित किए गए हैं, ताकि पुनर्वास और सामाजिक समावेशन सुनिश्चित किया जा सके।

- त्वचा
- परिधीय नसें
- आँखें
- नाक की परत

CRC में सरकारी योजनाओं के अंतर्गत उपलब्ध पुनर्वास

- चिकित्सीय पुनर्वास एवं सहायक उपकरण
- दिव्यांगता प्रमाण-पत्र एवं यूडीआईडी कार्ड
- कौशल प्रशिक्षण, परामर्श एवं आजीविका सहायता
- पेंशन, यात्रा रियायतें एवं सामाजिक सुरक्षा योजनाओं के लाभ
- आज कुष्ठ रोग के प्रति आवश्यकता है जागरूकता, समय पर उपचार और समावेशन की-न कि भय या भेदभाव की।

पुनर्वास की भूमिका

- कम्पोजिट रीजनल सेंटर, भोपाल में हम कुष्ठ रोग से प्रभावित लोगों को स्वतंत्रता और गरिमा के साथ जीवन जीने में सहायता करते हैं
- दैनिक जीवन कौशल वापस पाने के लिए फिजियो थेरेपी, ताकत और गतिशीलता सुधारने के लिए सहायक परामर्श एवं उपकरण
- व्यावसायिक प्रशिक्षण
- मनोवैज्ञानिक परामर्श
- जागरूकता- सामाजिक बाधाओं को दूर करने हेतु।



अत्यधिक धनुषाकार पैर



कुष्ठ रोग के कारण उँगलियों का गल जाना



सिंह मुख

सामान्य लक्षण और संकेत

- त्वचा पर सुन्न धब्बे (हल्के लाल रंग के)
- हाथ /पैर में संवेदन की कमी आना।
- हाथ की उँगलियों /पैर की उँगलियों में कमजोरी या मुड़ना
- आँखों का सुखना या पलकें बंद न कर पाना।

कुष्ठ रोग में संवेदी हानि

कुष्ठ रोग (हैन्सेन रोग) में होने वाली संवेदी हानि (sensory loss) एक मुख्य जटिलता है। इस रोग में नसों को नुकसान होता है, जिससे त्वचा पर दर्द, स्पर्श और ठंडा-गरम महसूस करने की क्षमता कम या खत्म हो जाती है। यह अक्सर हाथों, पैरों और चेहरे पर सुन्नता या कमजोरी के रूप में दिखती है। इसमें ग्रसित व्यक्ति को चोट लगने या जलने का पता नहीं चलता और आगे चलकर अल्सर, विकृतियाँ व अंधापन हो सकता है, जिसे रोकने के लिए शीघ्र निदान और उपचार ज़रूरी है।



हाथों की उँगलियों में विकृति

आप भी मदद कर सकते हैं !

आइये केवल शरीर ही नहीं समाज को भी ठीक करें। कुष्ठ रोग से प्रभावित लोगों के साथ भेदभाव न करें। शुरुआती वैदिक उपचार और पुनर्वास को प्रोत्साहित करें। अपने समुदाय में जागरूकता फैलाएँ।

आइये मिलकर कुष्ठ रोग (leprosy) से जुड़े कलंक को समाप्त करें।

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