



COMMUNITY BASED INCLUSIVE DEVELOPMENT PROGRAMME:

An Overview

A Collaborative Programme of
Department of Empowerment for Persons with Disabilities (Divyangjan)
Ministry of Social Justice & Empowerment, Government of India
&
University of Melbourne, Australia

Jointly developed by
Rehabilitation Council of India
(A Statutory Body of Ministry of Social Justice and Empowerment)
Department of Empowerment for Persons with Disabilities (Divyangjan)
Government of India



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Further information about RCI may be accessed from the website www.rehabcouncil.nic.in

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THAAWARCHAND GEHLOT
सामाजिक न्याय और अधिकारिता मंत्री
भारत सरकार
MINISTER OF
SOCIAL JUSTICE AND EMPOWERMENT
GOVERNMENT OF INDIA



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MESSAGE

Community Based Inclusive Development (CBID) has been advocated internationally as the core strategy for improvement in the quality of life of Persons with disabilities (PwDs). CBID was initiated by the World Health Organization, following the Alma-Ata declaration in 1978. It was promoted as a strategy to improve access to rehabilitation services for persons with disabilities in low and middle-income countries, by making optimum use of local resources through collaboration with NGOs and organizations of persons with disabilities.

The international community is currently focusing on the 2030 Agenda for Sustainable Development Goals, which recognizes the potential of community based inclusive development to accelerate inclusion of persons with disabilities and bridge the digital divide.

A Memorandum of Understanding (MoU) was signed between the Government of India and the Government of Australia in November, 2018 for cooperation in disability sector. Under the said MoU, the Department of Empowerment for Persons with Disabilities (Divyangjan); DEPwD, Ministry of Social Justice & Empowerment, Government of India & the Rehabilitation Council of India (RCI) in collaboration with the University of Melbourne, Australia have jointly developed the first Community Based Inclusive Development Programme. This program will be instrumental in developing a pool of community based rehabilitation workers trained to respond to issues concerning persons with disabilities at community level across the country.

I am delighted to launch this Programme together with a CBID guide book. I thank the entire team of the DEPwD, the RCI, the University of Melbourne and other experts for their valuable contribution in developing this programme and preparing the programme Guide book. I hope the programme will be widely accepted across the country.


(Thaawarchand Gehlot)

कृष्ण पाल गुर्जर
KRISHAN PAL GURJAR



सामाजिक न्याय और अधिकारिता राज्य मंत्री
भारत सरकार

MINISTER OF STATE FOR
SOCIAL JUSTICE & EMPOWERMENT
GOVERNMENT OF INDIA



MESSAGE

I extend my gratitude to the Rehabilitation Council of India, New Delhi and the University of Melbourne, Australia for their joint initiative in developing a six month '**Community Based Inclusive Development (CBID)**' Programme. I would also place on record my sincere thanks to all the experts who have contributed towards the development of its contents.

The objectives of the Programme are to create awareness and understanding about the support required from community rehabilitation stakeholders to meet the basic needs of persons with disabilities and enhance their quality of life along with their families. I hope this course will be useful for teachers, students and other stakeholders across the country and contribute towards building community resilience for mainstreaming persons with disabilities.

New Delhi
Dated: 06.04.2021


(Krishan Pal Gurjar)

शकुन्ताला डौले गामलिन, भा.प्र.से.
सचिव
Shakuntala Doley Gamlin, IAS
Secretary



भारत सरकार
सामाजिक न्याय और अधिकारिता मंत्रालय
दिव्यांगजन सशक्तिकरण विभाग
Government of India
Ministry of Social Justice & Empowerment
Department of Empowerment of Persons with Disabilities (Divyangjan)



Message

A responsible Government fulfils the needs and aspirations of its citizens by formulating policies and programmes for inclusion and empowerment of Persons with Disabilities (Divyangjan). As per Census 2011, 2.68 crore persons in India have some form or the other category of disability. The Rights of Persons with Disabilities Act, 2016 protects and promotes the rights and dignity of persons with disabilities (PwDs) in various spheres of life, be it educational, social, legal, economic, cultural or political.

In this paradigm of development, social affirmative action particularly in relation to empowerment of PwDs assumes special significance. All the stakeholders especially the grassroot level functionaries need to be properly groomed and equipped with a deep sense of understanding of disability specific issues as well as the modalities of social action for mainstreaming PwDs in the society.

In pursuance of the MoU signed in November, 2018 between the Government of India and the Government of Australia for cooperation in disability sector, a joint initiative was undertaken by Rehabilitation Council of India and University of Melbourne, Australia to develop a Community Based Inclusive Development (CBID) Programme. This programme aims at developing a cadre of frontline community based rehabilitation workers known as Divyang-Mitra who will help in building community resilience for comprehensive inclusion of PwDs. Divyang-Mitra will work in close coordination with Anganwadi and ASHA workers at the cutting edge level.

I place on record my deep appreciation for the tireless work performed by eminent experts involved in co-designing and development of the programme especially Smt. Tarika Roy, Joint Secretary, DEPwD, Shri K.V.S. Rao, Director, DEPwD, Dr. Subodh Kumar, Member Secretary, RCI, Dr. Nathan Grills, University of Melbourne, Prof. Lindsey Gale, University of Melbourne, Dr. Bhushan Punani, BPA, Ahmedabad, Dr. Sara Varughese, CBM, India, Shri Carmo Noronha, Bethany Society, Shillong, Shri Pankaj Maru, Madhya Pradesh, Prof. Sujata Bhan, SNTD, University, Mumbai, Dr. Varsha Gathoo, AYJNISHD, Mumbai and Shri Sandeep Thakur, ACE, RCI.

I sincerely hope that the CBID programme will fill up the existing gap in rehabilitation manpower at various levels to meet the growing need of the community in the near future.

(Shakuntala D. Gamlin)

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Professor Michael Wesley
Deputy Vice Chancellor
International



University of Melbourne
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MESSAGE

It with great pleasure that I write to mark the launch of the community Based Inclusive Development course. This is the culmination of a cooperative and productive relationship between the University of Melbourne and Department of Empowerment of People with Disability of the Ministry of Social Justice and Empowerment. This course is a testament to the hard work of the Honorable Minister Gehlot and Secretary Gamlin, in cooperation with our University professors Bruce Bonyhady, Nathan Grills and Gale.

It is worth noting the University of *Melbourne's Strategic Vision* involves growing linkages between the University of Melbourne and Indian Institutions. We launched this strategy in 2019 in Delhi at which time we also discussed the proposed Programme of work with The Honorable Minister Gehlot, Minister for Social Justice and Empowerment.

The strategy specifically mentions the relationship with the Department of Empowerment of People with Disability (DEPwD) under the ministry of social justice and empowerment DEPwD as a partner and refer to developing training and teaching Programmes together with Indian partners.

This productive relationship is not merely based on the University's level of expertise in disability and education – although it certainly a world leader. Nor is it based purely on the DEPwD capacity to develop new and exciting courses to improve the wellbeing of people with disability, although it has significant capacity. Instead this course builds on mutual trust that has been built between the Ministry and the University of Melbourne.

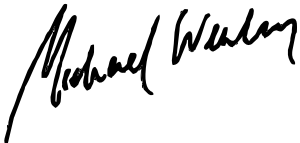
In 2019, coinciding with the University's India Strategy launch, the Minister of Social Justice and Empowerment met with our Chancellor in February 2019 and then the VC, DVCI, All director, MDHS Dean and Nathan Grills in August 2019. We have also hosted the Secretary, three joint secretaries and the head of the Rehabilitation Council of India to visit Melbourne University on three separate visits in 2018, 2019, 2020.

Building on these links we worked closely with the High commission and our Indian counterparts to help develop a bilateral India-Australia MoU on disability. This was signed during the President of India's visit in 2018. We have already made significant progress on all the areas outlined in the MoU.

This enabled cooperation to Co-design the Community Based Inclusive Disability course. Two University institutes (Nossal Institute and the Melbourne Disability Institute) worked closely with the Department of People with Disability (DEPwD) to jointly develop this course. The course will now be rolled out across India and we will continue provide academic expertise to evaluate the Programme.

We not only hope that this course betters our ties with India, but more importantly that it betters the access to inclusive development for those with disability.

Yours sincerely,

A handwritten signature in black ink that reads "Michael Wesley". The signature is written in a cursive, flowing style.

Professor Michael Wesley

Deputy Vice Chancellor International, University of Melbourne

Prof. Nathan Grills
Public Health Physician
Australia India Institute - Senior
Research Advisor



University of Melbourne
Parkville VIC 3010,
Australia



MESSAGE

After three years of expert planning and preparation, it is with much excitement that this carefully developed Community Based Inclusive Development course is launched. It's a culmination of an exciting and fruitful partnership between the University of Melbourne (The Nossal institute, Australia India Institute and Melbourne Disability Institute) the Department of Empowerment of People with Disability (DEPwD) - including the Rehabilitation Council of India along with the its national institutes. Importantly the course will ensure that people with disability in India receive the necessary services and supports they need to flourish.

In India, there are about 26.8 million persons with disabilities which is about 2.21% of its population. The Modi Government has actively promoted disability inclusion having passed the Rights of Persons with Disabilities Act, 2016 and introduced Programmes such as Accessible India.

Australia has been a world leader in promoting disability inclusion and disability financing with the world's first National Disability Insurance scheme. The Nossal Institute at the University of Melbourne has a long history of disability research in India including the Rapid Assessment of Disability project, the CHGN Uttarakhand Cluster, research on CBR projects (EHA) and development of models for DPO formation.

The DEPwD and University of Melbourne have drawn on our joint expertise in disability to develop this CBID course. Melbourne University was involved in the development of a bilateral MoU on disability (Dec, 2018) which specified the joint development of disability training Programmes. It was signed during the visit by the President of India. Building on the MoU the

Honourable Minister Gehlot met with the University of Melbourne's Chancellor Allan Myer's and Vice Chancellor Duncan Muskell in 2019 to further develop the Programme of work. The Honourable Minister Gehlot's leadership in developing this CBID course must be acknowledged.

Hence, the first competency based framework course was developed through the Rehabilitation Council of India, DEPwD. Developing the CBID course involved various rounds of surveys, workshops, field tests, trainings and expert meetings. We must acknowledge Professor Lindsey Gale and Professor Bruce Bonyhady (Melbourne Disability Institute) who facilitated the course development.

On behalf of the Nossal Institute for Global Health and the University of Melbourne, we heartily congratulate our partners on producing this excellent Programme. This CBID course would not have been possible without the inspirational leadership and friendship of Secretary Shakuntala Gamlin from the Department for the Empowerment of People with Disability. We also wish to acknowledge Dr. Subodh Kumar, Member Secretary of RCI whose enthusiasm has brought this project to fruition.

We hope that with DEWPD and RCIs expertise, facilitation and leadership, this course might be rolled out across the country such that wellbeing of people with disability is improved. The University of Melbourne, as a top-ranked University in Asia and number 32 in the world, stands ready to assist in the roll-out, evaluation and scale-up of the CBID Programme.



Prof. Nathan Grills (DPHIL, DPH, MBBS, MPH)
Public Health Physician (FAFPHM)
Australia India Institute - Senior Research Advisor



Melbourne School of Population and Global Health
Nossal Institute for Global Health

Prof. Lindsey Gale
PhD|Research Fellow



University of Melbourne
Parkville VIC 3010,
Australia



Message from Course Facilitator

It has been a privilege to work with Indian CBR experts on the development of a CBID Certificate course for India – a country which has been providing community-based responses to disability support and inclusive development for more than forty years. The collaboration has been helped by the approach to the design of this new competency based CBID Certificate, which requires expert collaboration. Consequently, we brought together experts in disability inclusion, CBID fieldwork, international development in India, and educational design. I would especially like to acknowledge the Indian experts who participated and are still participating in one or more of the four phases of this work:

- 1. Constructing and testing a CBID ‘learning pathway’.** In 2019, over 30 Indian CBID experts participated in two online Delphi expert panels and six attended a week of workshops in Melbourne to draft a CBID Fieldworker Learning Pathway. This proposed Pathway was then taken to the field to be tested, which involved a further 34 CBID experts assessing 100 practicing CBID Fieldworkers to verify the different levels of CBID skill.
- 2. Development of an aligned curriculum.** Following development and validation of the foundational learning pathway, another team of 19 experts attended a second week of workshops – this time at RCI headquarters in Delhi, to draft the six-month course to match the learning pathway. The team leaders and members who worked on the three Key Performance Areas of the Course should be acknowledged by name:
 - a) *Inclusive Community Development* – led by Carmo Noronha (Bethany Society, Shillong) with team Umesh Kumar (CBM), Varsha Gathoo (AYJNISHD, Mumbai), Pankaj Maru

(Special Needs Education Home), and Shishir Chowdhury (Bhartiya Viklang Jan Forum)

- b) *Professional Behaviour and Reflective Practice* – led by Sara Varughese (CBM India) with team Adeline Sittler (CMC Vellore), Fairlene Soji (CBM), and JachinVelavan (CMC Vellore)
- c) *Assessment and Intervention* – led by Bhushan Punani (Blind People’s Association) with team Jubin Varghese (EHA India), Leela Agnes (CHAI), Sujata Bhan (SNDT Women’s University, Mumbai), and Vishal Gupta (CHAI).

3. Pilot rollout. After such extensive work and ongoing finalising across the difficult year of 2020, it is wonderful to see the project at this stage.

4. Evaluation and Scale-up. The University of Melbourne can continue to provide academic expertise to evaluate the Programme and support its country-wide scale-up.

I am confident that this course will equip new CBID workers to engage competently in this important, challenging work.



Lindsey Gale



Melbourne School of Population and Global Health
Nossal Institute for Global Health

डा. सुबोध कुमार
सदस्य सचिव
DR. SUBODH KUMAR
Member Secretary



भारतीय पुनर्वास परिषद्
(सामाजिक न्याय और अधिकारिता मंत्रालय, दिव्यांगजन
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REHABILITATION COUNCIL OF INDIA
(A Statutory Body under the Ministry of Social Justice and Empowerment,
Department of Empowerment of Persons with Disabilities) (Divyangjan)



ACKNOWLEDGEMENTS

Department of Empowerment of Persons with Disabilities (Divyangjan), Ministry of Social Justice & Empowerment, Government of India has assigned the responsibility to the Rehabilitation Council of India (RCI) to develop appropriate material and modalities for its first competency based framework viz. 06 months. **“Certificate Course in Community Based Inclusive Development (CBID) Programme** in collaboration with University of Melbourne, Australia in pursuance to the MoU signed between Govt. of India & Govt. of Australia.

The Council has conducted several meetings through face to face and virtual mode including international workshop to prepare a roadmap and strategies to develop the CBID programme. Finally, we have developed an overview of the CBID programme, its Course Structure, Course Curriculum, Facilitator Guide Phase-I, Facilitator Guide Phase-II, Facilitator Guide Phase-III, Explanatory Notes for Facilitator, Reference Material for successful implementation of the said programme.

I express my deep gratitude to **Smt. Shakuntala D. Gamlin, IAS, Secretary, DEPwD, MoSJ&E, Govt. of India & Chairperson, RCI** for her continuous support and esteem guidance in development of the CBID programme.

I am also thankful to Smt. Tarika Roy, Joint Secretary, DEPwD, MoSJ&E, Govt. of India for guiding us from time to time to develop of the CBID programme, despite of her busy schedule.

I acknowledge the contribution of Prof. Nathan Grills, Prof. Lindsey Gale, Dr. Bhushan Punani, Shri Carmo Noronha, Dr. Sara Varughese, Shri Pankaj Maru, Prof. Sujata Bhan, Dr. Varsha Gathoo and all the eminent experts for their hard work, sincere efforts for developing the CBID programme.

I also take this opportunity to put on record the appreciation of RCI team which worked continuously to convert it into a reality. RCI specifically acknowledges the untiring efforts of Shri Santosh Pal, Assistant Secretary, RCI, Shri Sandeep Thakur, ACE, Shri Sanjay Mittal, PO, Smt. Reena Rani, Ms. Kritika Gupta, Shri Rajan, Administrative & Accounts Officials of RCI.

This programme is an outcome of the collective efforts of group of eminent experts, officers of DEPwD and RCI. I hope that this programme will be useful for rehabilitation workers, community workers, rehabilitation personnel and professionals and other stakeholders across the country.

With Best Wishes!


(Dr. Subodh Kumar)

Place : New Delhi

Date : 30-03-2021

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About the Rehabilitation Council of India

Vision

A facilitative environment reflective of convergent effort fostering the highest standards in human resource development in the disability sector, for the singular and ultimate purpose of providing the best quality of education, training and composite rehabilitation services to persons with disabilities (Divyangjan), based on the paradigm of human rights and on the principles of inclusion.

Mission

- *To ensure the highest quality of emerging rehabilitation professionals through competency based curricula, which addresses the life cycle needs of persons with disabilities in contemporary India.*
- *To promote the highest attainable standards in the development of human and material resources, towards preparation and delivery of composite services in education, training, rehabilitation, skilling, research and technology.*
- *To prepare professionals who will respect the rights, dignity, autonomy, confidentiality and cultural diversity of persons with disabilities.*
- *To promote the training of rehabilitation professionals in un-served and under-served areas of the country.*
- *To ensure that the current focus is on training in cross disability, inclusion and multi-sectoral convergence, which lead persons with disabilities to live independently, confidently, and productively in their own communities.*

The Rehabilitation Council was initially set up under the Societies Registration Act XXI of 1860 vide Resolution No 22-17/83-HW.III dated 31st January, 1986 to have uniformity and to ensure minimum standards and quality of education & training in the field of special education and disability rehabilitation. It was given Statutory status by an Act of Parliament, the Rehabilitation Council of India Act, 1992 (No. 34 of 1992) dated 1st September, 1992 effective from 22nd June, 1993. The RCI Act was amended by Parliament in 2000 (No.38 of 2000) to make it more broad based.

The Act provides for constitution of the Rehabilitation Council of India for regulating and monitoring the training of rehabilitation professionals and personnel, promotion of research

in disability rehabilitation and special education and maintenance of Central Rehabilitation Register (CRR) and for matters connected therewith or incidental thereto.

By signing and ratifying the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), India has committed itself to harmonize all the domestic laws including the RCI Act. The Convention has brought the inclusion of persons with disabilities (Divyangjan) to the centre-stage need to implement the provisions of the convention in its true spirit. Accordingly, the syllabi of the various disability rehabilitation courses developed and standardized by RCI are being continuously revised so as to meet the requirements of the relevant provisions in the UNCRPD.

With the implementation of the Rights of Persons with Disabilities Act, 2016 by the Government of India, the categories of disabilities have been increased from 07 to 21, thus, enhancing the responsibility of the Council to make provision for human resource development for all categories of disabilities notified in the Act. The Council has initiated appropriate action to include disability specific contents in syllabi of different courses and development of need based courses.

MAJOR PROVISIONS OF THE RCI ACT, 1992

Objectives of the Council

1. To regulate and monitor the training Programmes in the field of disability rehabilitation and special education.
2. To prescribe minimum standards of education and training for various categories of human resources dealing with persons with disabilities (Divyangjan).
3. To regulate these standards in all training institution to bring about uniformity throughout the country.
4. To make recommendations to the Ministry regarding recognition of qualification granted by Training Institution, Universities, etc., in India for rehabilitation professionals/personnel.
5. To make recommendations to the Ministry regarding recognition of qualification granted by institution outside India under the scheme of reciprocity.
6. To maintain Central Rehabilitation Register (CRR) of persons possessing the recognized rehabilitation qualification.
7. To encourage Continuing Rehabilitation Education Programme at approved institution.
8. To promote research in disability rehabilitation and special education.

Functions of the Council

1. Qualifications granted by any University or other institution in India that are included in the Schedule shall be recognized qualifications for Rehabilitation Professionals/ personnel.
2. Any University or other Institution which grants qualification for rehabilitation professionals not included in Schedule may apply to the Central Government to have any such qualification recognized and the Central Government, after consulting the Council may, by notification amend the Schedule so as to include such qualification therein and any such notification may also direct that any entry shall be made in the last column of the Schedule against such qualification only when granted after a specified date.
3. The Council may enter into negotiations with a recognized authority in any other country for settling up of a scheme of reciprocity for the recognition of qualifications. In pursuance of any such scheme, the Central Government may by notification, amend the Schedule so as to include therein any qualification which the Council has decided should be recognized, and by such notification may also direct that an entry shall be made in the last column of the Schedule declaring that it shall be a recognized qualification only when granted after a specified date.
4. Registration of Rehabilitation Professionals/Personnel in the Central Rehabilitation Register (CRR) of persons possessing the recognized rehabilitation qualifications as per the Schedule attached to the Act.
5. To prescribe the minimum standards of education required for granting recognized rehabilitation qualification by Universities/Institutions in India.
6. To prescribe the standards of professional conduct, etiquette and code of ethics for rehabilitation professional/personnel.
7. To assess and grant approval to institution/universities for the training of professionals in the field of rehabilitation and to facilitate their recognition and its withdrawal by the Government.
8. The Council may appoint such number of visitors as it may deem requisite to inspect any University or Institution wherein education for rehabilitation professional is given or attend any examination for the purpose of granting recognized rehabilitation qualifications.

Categories of Rehabilitation Professionals/Personnel covered under the RCI Act

- i) Audiologists and Speech Therapists
- ii) Clinical Psychologists
- iii) Hearing and Ear Mould Technicians
- iv) Rehabilitation Engineers and Technicians

- v) Special Teachers for Educating and Training the Persons with Disabilities (Divyangjan)
- vi) Vocational Counsellors, Employment Officers and Placement Officers dealing with Persons with Disabilities
- vii) Multi-purpose Rehabilitation Therapists & Technicians
- viii) Speech Pathologists
- ix) Rehabilitation Psychologists
- x) Rehabilitation Social Workers
- xi) Rehabilitation Practitioners in Mental Retardation
- xii) Orientation and Mobility Specialists
- xiii) Community Based Rehabilitation Professionals
- xiv) Rehabilitation Counsellors/Administrators
- xv) Prosthetists and Orthotists
- xvi) Rehabilitation Workshop Managers
- xvii) Any other category of Professionals included from time to time

At present, the Council has standardized 60 training programmes at Certificate, Diploma, Bachelors, Master and M.Phil level which are being offered through face-to-face mode at 650 Training Institutions/University Department all over the country. In addition to this, B.Ed. Spl. Ed. –ODL course through Open & Distance Learning Mode through State Open Universities are also offered within their territorial jurisdiction.

RCI also maintains and renews registrations of qualified Personnel and Professionals in its Central Rehabilitation Register (CRR) who are working in the field of Special Education & Disability Rehabilitation. As on date 1.64 lakhs Personnel and Professionals are registered with the Council under various categories.

About the University of Melbourne

Established in 1853, the University of Melbourne is a public-spirited institution that makes distinctive contributions to society in research, learning and teaching and engagement. It's consistently ranked among the leading Universities in the world, with international rankings of World Universities placing it as number 1 in Australia and number 32 in the World (Times Higher Education World University Rankings 2017-2018).

The University of Melbourne is a public research University located in Melbourne, Australia. Founded in 1853, it is Australia's second oldest University and the oldest in Victoria. Its main campus is located in Parkville, an inner suburb north of Melbourne's central business district, with several other campuses located across Victoria.

Incorporated by the Victoria Colony, the University of Melbourne is one of Australia's six sandstone Universities and a member of the Group of Eight, Universities 21, Washington University's McDonnell International Scholars Academy, and the Association of Pacific Rim Universities. Since 1872 various residential colleges have become affiliated with the University, offering accommodation for students and faculty, and academic, sporting and cultural Programmes. There are ten colleges located on the main campus and in nearby suburbs.

The University comprises ten separate academic units and is associated with numerous institutes and research centres, including the Walter and Eliza Hall Institute of Medical Research, Florey Institute of Neuroscience and Mental Health, the Melbourne Institute of Applied Economic and Social Research and the Grattan Institute. Amongst the University's fifteen graduate schools, the Melbourne Business School, the Melbourne Law School and the Melbourne Medical School are particularly well regarded.

Times Higher Education ranked the University of Melbourne 32nd globally in 2017–2018, while the Academic Ranking of World Universities places it 38th in the world (both first in Australia). In the QS World University Rankings 2019, the University ranks 39th globally and is ranked sixth in the world according to the 2019 QS Graduate Employability Rankings. Four Australian Prime Ministers and five governors-general have graduated from the University of Melbourne. Ten Nobel laureates have been students or faculty, the most of any Australian University.

Indeed, Melbourne is a seven times winner of the Economist's World's Most Livable City Award, and is a UNESCO City of Literature, as well as the birthplace of Australian rules football and a major centre for street art, music, and theatre.

Melbourne is known for offering students an experience that's a lot more than just structured learning. The main Parkville campus is close to transport, cafes, shopping, arts and sports venues and accommodation.

Students will find a blistering array of cultural activities on campus here, be it theatre, comedy, film or public lectures, and it's easy to find people with matching interests by joining one of over 200 affiliated clubs and societies, ranging from Chess Club to Women in Science and Engineering, to the Chocolate Lovers' Society. Sports enthusiasts are well catered for too, with a 25-metre six-lane heated indoor pool, an athletics track and sports field, and a large strength and fitness gym.

The University has 10 residential colleges where most students live, which provide a quick way to build an academic and social network. Each college provides sporting and cultural Programmes to enrich the academic experience, which is at the centre of University life.

Degrees at the University of Melbourne stand out for being modelled on those from top institutions overseas. Students spend a year exploring a range of subject areas before choosing a major. They also study subjects outside as well as inside their chosen discipline, giving Melbourne students a breadth of knowledge that sets them apart.

Collaborations and Co-designing of the CBID Programme

A Memorandum of Understanding (MoU) has been signed between Government of India and Department of Social Service, Government of Australia on 22 Nov., 2018 to incorporate the joint development of disability training programmes in India. In pursuance to the said MoU, the Department of Empowerment of Persons with Disabilities (DEPwD), Ministry of Social Justice & Empowerment (MSJ&E), Government of India has taken initiatives to develop CBID programme as per WHO-CBR Guidelines 2010 in collaboration with Nossal Institute for Global Health, University of Melbourne, Australia to develop human resource in this sector.

DEPwD, MSJ&E has entrusted the responsibility to Rehabilitation Council of India (RCI) to co-design the CBID Programme in collaboration with Nossal Institute for Global Health, University of Melbourne, Australia. Accordingly, the Council has developed a concept note based on innovative, evidence and consensus for the proposed Community Based Disability training programme to equip personnel to serve the disability at grassroot level across the country.

An Expert Committee comprising of Dr. Subodh Kumar, Member Secretary, RCI, Dr. Bhushan Punani, Executive Secretary, Blind Peoples Association, Ahmedabad, Shri Carmo Nornoha, Executive Director, Bethany Society, Shillong, Dr. Sara Varughese, CBM, India; Bangalore has been constituted by the Council to utilize their experience and expertise to co-design of CBID programme in Indian context.

Meeting of the said committee was held on 5 Feb., 2019 at DEPwD. During the meeting, various matters such as development milestone of CBR programme in India, status of RCI approved CBR programmes, comparison of components and sub components of DCBR course of RCI in light of WHO CBR Guidelines, RCI's proposal for co-design of CBID Course, Role of CBID personnel, adaptations for CBID personnel, employment opportunities, visibility of the course and role of Advisory/Reference Group have been discussed. After having in-depth deliberation, it was decided that in the 1st phase 6 months face to face programme on CBID to be co-designed by RCI in collaboration with Nossal Institute for Global Health, University of Melbourne, Australia.

Nossal Institute for Global Health, University of Melbourne adopted the Delphi survey approach and developed a questionnaire for experts to participate in the Delphi survey. A

group of 95 experts working in field of CBR, were recommended by the Council and 75 experts participated in all 03 rounds of Delphi Survey for development of competency based curriculum framework for the proposed CBID programme.

Based on the outcome of Delphi Survey, it was decided by Nossal Institute for Global Health, University of Melbourne to finalize the competency based curriculum framework for proposed CBID programme with the technical expertise of Indian and Australian Experts. Accordingly, 05 days workshop from 13-17 April, 2019 was organised by the University of Melbourne to develop the draft structure of CBID programme in Indian context. DEPwD, M/oSJ&E, Govt. of India vide its letter no. 13-03/2018-DD-III dated 29 March, 2019 nominated Dr. Subodh Kumar, Member Secretary, RCI led the Indian delegation comprising of non-official experts viz. Dr. Bhushan Punani, Dr. Sara Varguese Shri Carmo Noronha and Shri Pankaj Maru to attend the said international workshop at Melbourne.

All the experts under the supervision and guidance of Prof. Lindsey Gale & Prof. Nathan Grills, deliberated upon the outcome of the Delphi Survey including the various aspects of the CBID programme in Indian context. During the workshop, the Competency Based draft curriculum framework for certificate course in CBID was developed comprising of 06 important competency parameters i.e. Framework of Understanding, Assessment and Goal Setting, Intervention and Service Implementation, community Engagement and Networking, Attitudes and Behaviour, Reflective Practice focusing on Learning Outcome, Proficiency Indicator and quality Criteria.

Final proceedings of the 05 days technical workshop was submitted by the University of Melbourne to DEPwD, MSJ&E. Appropriate action was initiated by the Council based on the recommendations of the workshop and as per directions of DEPwD.

Another meeting of technical group for co-design of CBID Programme was held on 14 June, 2019 under the Chairpersonship of Dr. Subodh Kumar, Member Secretary at RCI. 09 Experts from India & Australia participated in the said meeting. During the meeting competency based curriculum framework and other modalities to rollout the CBID programme was finalized.

International Level Workshop of 06 days duration was conducted from 16-21, Sept., 2019 at RCI to develop the content and resource material for CBID programme. Meeting was held under the Chairpersonship of Smt. Shakuntala. D. Gamlin, IAS, Secretary, DEPwD (Divyangjan), M/oSJ&E, Government of India & Chairperson, RCI. Smt. Tarika Roy, Joint Secretary, DEPwD

(Divyangjan), Dr. Subodh Kumar, Member Secretary, RCI were also present during the workshop, 19 Experts from India & Australia participated in the workshop. During the workshop, curriculum of CBID programme and session plans for all the 03 competency based parameters i.e. Inclusive Community Development (ICD), Professional Behaviour & Reflect of Practice (PBRP), Assessment & Intervention (A&I) was finalized. Proceedings of the workshop have been prepared and approved by the Secretary , DEPwD (Divyangjan).

Meeting to develop the Roadmap to rollout CBID programme was held on 17th January, 2020 at 10.30 a.m. at Conference Room, RCI under the Chairpersonship of Smt. Tarika Roy, Joint Secretary, DEPwD, MSJ&E, Govt. of India. Shri K.V.S. Rao, Director, DEPwD, Dr. Subodh Kumar, Member Secretary, RCI and other experts were present in the meeting to develop the Self Learning Material for all the 03 modules of CBID Programme.

Meeting with the Directors, National Institutes and Experts working in CBR was conducted on 3 Feb., 2020 at RCI under the Chairpersonship of Smt. Tarika Roy, Joint Secretary, DEPwD to finalize the modalities to rollout the CBID programme. During the meeting, responsibility was assigned to content writers and developers for development of Self Learning Material (SLM). It was further decided that content writers will develop the SLM under the supervision and guidance of the Chairperson of respective CBID groups. Final draft SLM to be submitted by 31 March, 2020.

Meeting of Chairpersons of the respective CBID Groups & Content Developers was held on 17 August, 2020 to harmonize Course Structure, Session Plans & Self Learning Material (SLM) of CBID programme based on inputs of University of Melbourne, Australia.

The final draft of harmonized Course Structure, Session Plans & Self Learning Material (SLM) of CBID programme received from the content developers and Prof. Lindsey Gale , University of Melbourne, Australia.

Meeting of the Chairpersons of the respective CBID groups, content developers, unit writers and officials of RCI and DEPwD was conducted on 14.12.2020 to finalize the modalities to rollout the CBID programme.

Meeting of expert group to finalize the documents in r/o CBID Programme was conducted on 11th Jan.,2021. During the meeting, it was decided to compile all the documents and submit the final draft of CBID documents to RCI.

During the meeting of the core group of the CBID programme conducted on 28 Jan.,2021 under the Chairpersonship of Smt. Shakuntala. D. Gamlin, IAS, Secretary, DEPwD, MoSJ&E, Govt. of India & Chairperson, RCI, the following documents have been approved unanimously.

- Course Curriculum & Overview
- Facilitator Guide phase-I
- Facilitator Guide phase-II
- Facilitator Guide phase-III
- Explanatory notes for facilitator
- Reference material

The DEPwD, M/O SJ&E has decided to launch this programme by the end of March 2021.

Vision & Mission of the CBID Programme

Persons with disabilities (PwDs) have been in subsistence since the ancient times as their mention has been found in the Great Indian epics and mythological stories. While efforts of many PwDs take for example Helen Keller, or scientists such as Edison or Einstein, have been appreciated; the issues of their 'inclusion' and addressing their needs have seen many shades and models in the society. These range from a total neglect, to forget and hide and in later decades treating and curing them for normalisation. However, due to the global endorsements from various frameworks such as the Salamanca Framework (1994) and UNCRPD (2006), disability is now considered a human diversity and hence, there is now a different perspective towards re-habilitation of PwDs. The recent RPwD Act (2016) in India emphasises community capacity building to improve participation and engagement of PwDs at the community level, alongside providing for their necessary supports and reasonable accommodation. The Act envisages this will improve PwD self-sufficiency and empower them to contribute to national development as part of the citizenry of the nation.

The Vision of the 'Certificate Course in CBID' is to democratise the process of inclusive community development- by the community, for the community and of the community. Towards this, the course has a twin track approach; (1) Provide knowledge, develop skills and competencies and a disposition among community workers about various aspects of disability so that marginalisation of PwDs is prevented and (2) Facilitators such as the 'Divyanga Mitra' are created for the community who can assist in the delivery of various Government schemes, policies and Programmes for PwDs.

The Mission is to develop competencies in a training programme so that RCI-certified personnel can:

1. Facilitate community assessment and mapping for early identification, intervention and development of persons with disabilities in all domains.
2. Undertake various activities to achieve disability-inclusive community development.
3. Exercise professional behaviour and reflective practice.

Scope of Work - CBID Worker

The unique feature of the Course is the progressive development of competency in each of the Key Performance Areas (KPA) as training proceeds.

Disability is unpredictable, but it is not a disease to be cured nor is it contagious. It is also a misnomer to think that it only happens to older people. People with disabilities (PwDs) form a vulnerable group and are prone to more risks of health and exploitation if they are not empowered. Children, young people or for that matter any men and women who have temporarily or a permanent disabling condition find difficulty in daily living in the community. These include barriers in their socialising, schooling, education, communication, development, professional training, mobility and hence earning for living. With these limitations, PwDs become even more dependent on others, mis- or uninformed about day-to-day affairs, and less able to contribute to the nation's development, in spite of having potential. According to current statistics, 2-3 percent of India's population have some form of disability with the greatest percentage living in rural areas (Ministry of Statistics, 2016).

On successfully completing this CBID Certificate Programme, new CBID workers will be able to competently support people with disability in their local community and bring people with and without disability together to work on facilitating inclusive community development for all. Certified personnel, as the 'Divyanga Mitra', will then be able to work with governmental or other non-governmental agencies and organizations in formal and informal sectors. Their competence will enable them to bring about social change, improve the quality of life of PwDs, and facilitate their social, educational, workplace and financial inclusion. They will act as a link between local authorities and other voluntary agencies and help PwDs achieve their rights and entitlements and have an engaged and participatory community life.

Qualified CBID worker will have an extensive scope of work possibility – ranging from being an employed Community Worker to operating in a self-employed capacity as a social entrepreneur working for the 3 Ps of a community; People, Planet and Profit.

Regulations of the Programme

Definition of Key Terms

Programme: Programme means a set of 3 modules and completion of the Theory, Practicum and the Practical of which will end with an award of a Certificate.

Module: The Module of the Programme of the CBID means a standalone course comprising of Units that are linked together in an academically meaningful way with a built in taxonomy of knowledge, understanding and application of several learning topics. The 3 Modules of linked courses together are considered as a complete 'Programme'.

R.1: Title: Certificate Programme in Community Based Inclusive Development (CBID)

R.2: Duration of the Programme: The duration of the Programme will be of 6 months. The programme will be conducted by RCI approved Training Institutes 5 days a week which will comprise of theory lectures, practical/ practicum on each working day for minimum of 6 hours per day.

R.3: Mode of Transaction: The Programme will be conducted through face-to-face mode. Amid COVID-19 pandemic the course may also be conducted through blended online mode.

R.4: Intake: Each batch of CBID programme will comprise of a maximum of 40 learners.

R.5: Eligibility of Learners: Candidates who have successfully passed the SSC (10th Std Examination) from any recognised State or Central Board will be eligible to enrol as learner for a Certificate Programme of CBID. The reservation and relaxation for SC/ ST / OBC / PWD/ EWS and other categories shall be applicable as per the rules of the Central Government / State Government.

R.6: Attendance: The minimum 80% attendance is required for all theory component work and 90% attendance for all the practicum and practical components. A completion certificate of all above parameters is to be issued by the Head of the Training Institution in which the learner is enrolled to appear in the final examinations.

Conduct & the Scheme of Examination of the CBID Programme

Training Institutions: In the 1st phase, National Institutes under DEPwD in collaboration with technical partners i.e. eminent NGOs working in the field of CBR approved by the Council will conduct the CBID programme. The approval will be given to those training institutions who are engaged in the Community Based programme and having all requisite infrastructural facilities and faculties as per the prescribed norms of the Council to conduct the said programme.

Evaluations: The learners enrolled for the programme will be evaluated on a continuous comprehensive basis. On completion of all the 03 Modules he/she will appear for the final examination at the end of programme. Trainees enrolling for the programme will be evaluated , which is as under;

- a) on a *continuous basis* as they complete the set Hurdle, Journal, Portfolio and Assignment Tasks of the Course;
- b) on a *summative basis* at the close of each Phase and conclusion of the Course, by a comprehensive Observational Assessment completed by their Trainer/Placement Supervisor.

Medium of Instructions: The programme will be conducted in Hindi & English or any other regional language as per the provisions of the programme guide and subject to availability of training material in regional languages.

Course Material: The Training Institutions approved by the RCI to conduct the CBID programme will provide the relevant materials and session plans to the learners. The Training Institutions may Translate the English material in regional language or in accessible formats as per the needs of the learner.

Scheme of Examinations: Examinations of the programme will be conducted as per the Scheme of Examination of NBER, 2018 of RCI in respect of Certificate/Diploma Level Courses in Special Education & Disability Rehabilitation.

Structure and Examination Pattern of the CBID Programme

Sr. No.	KPA	Theory (Hours)	Practical (Hours)
1	Inclusive Community Development	115.5	172.5
2	Assessment & Intervention	115.5	172.5
3	Professional Behaviour and Reflective Practice	57	87
Total		288	432
Theory : Practical (%)		40	60
Total Hours		720	

Key Performance Areas :

KPA - I: INCLUSIVE COMMUNITY DEVELOPMENT (ICD)

Unit	Module	Hours
<i>Unit ONE:</i> Demonstrating Knowledge of CBID Concepts & Underpinnings	Module 1: Community, Disability and Development	24
	Module 2: Models of Disability and Legislative Supports	
	Module 3: Government Programmes Supporting Inclusion	
	Module 4: Community Empowerment and Resource Mobilisation for ICD	
<i>Unit TWO:</i> Engaging and Profiling the Community	Module 1: Asset-Based Approaches to Community Engagement	84
	Module 2: Planning and Implementing Participatory Strategies	
	Module 3: Planning and Conducting Community Meetings	
	Module 4: Strategies for Mapping and Profiling the Community	

Unit	Module	Hours
<i>Unit THREE:</i> Working with Government Structures	Module 1: Liaising with Local Bodies	54
	Module 2: Engaging with Sectoral Linkages of Government	
	Module 3: Appraising Current Status and Extent of Compliance	
	Module 4: Maintaining Interest and Commitment to ID Goals	
<i>Unit FOUR:</i> Supporting Community Action	Module 1: Functioning as a Change Agent	102
	Module 2: Determining Community Priorities	
	Module 3: Engaging Networks and Collaboration	
	Module 4: Supporting Advocacy for the Rights of all Citizens	
	Module 5: Undertaking Community Projects and Campaigns	
Unit FIVE: Supporting Community Action	Module 1: Using Participatory Approaches to Identify Leaders	24
	Module 2: Developing Leadership Skills	
	Module 3: Recruiting Resources for Leaders	
	Module 4: Achieving Group Self Determination and Self-Efficacy	
Total hours		288

Key Performance Areas :

KPA - II: ASSESSMENT AND INTERVENTION (A&I)

Unit	Module	Hours
<i>Unit ONE:</i> Understanding Disability	Module 1: Disability and its Functional Impact on Individuals and Families	36
	Module 2: Models of Disability and Their Implications on CBID Practice	
	Module 3: Government Schemes and Support Provisions and Procedures	

Unit	Module	Hours
<i>Unit TWO:</i> Assessment and Planning	Module 1: Positive Working Relationships	57
	Module 2: Screening for Disability	
	Module 3: Reviewing and Interpreting Results	
	Module 4: Communicating and Discussing Results and Findings	
	Module 5: Analysing Needs Using a Collaborative, Strengths-Based Approach	
	Module 6: Supporting Realistic and Aspirational Planning and Goal-Setting	
<i>Unit THREE:</i> Facilitating Knowledge, Linkages and Referrals	Module 1: Providing Appropriate, Timely Information	51
	Module 2: Facilitating Certification	
	Module 3: Determining and Linking People to Appropriate Services	
<i>Unit FOUR:</i> Supporting and Providing Multi Sectoral Intervention	Module 1: Demonstrating an Understanding of Interventions in Scope of Role	144
	Module 2: Enhancing Holistic Development of the Individual with Disability	
	Module 3: Supporting Fitting and Training of Assistive and Rehabilitative Devices	
	Module 4: Teaching Orientation and Mobility Techniques	
	Module 5: Communicating Using Different Methods	
	Module 6: Working With and Supporting People with Mental Health Problems	
	Module 7: Supporting Families and Other Close Supports	
	Module 8: Monitoring and Evaluating Interventions	
Total hours		288

Key Performance Areas :

KPA III: PROFESSIONAL BEHAVIOUR AND REFLECTIVE PRACTICE

Unit	Module	Hours
<i>Unit ONE:</i> Fulfilling Role Expectations and Requirements	Module 1: Taking on the Practical and Logistical Requirements of the Role	36
	Module 2: Working Legally and Ethically	
	Module 3: Working Effectively in a Team	
<i>Unit TWO:</i> Organising and Managing Tasks and Responsibilities	Module 1: Preparing Work Plans	69
	Module 2: Managing Contingencies	
	Module 3: Completing Documentation and Reporting	
<i>Unit THREE:</i> Maintaining Personal Wellbeing and Continuing Education	Module 1: Monitoring and Maintaining Personal Wellbeing	30
	Module 2: Planning and Monitoring Continuous Improvement	
Total hours		135

KPA/Phase		Learning Outcomes	Pr	Th.	Total
ICD	1	Understands relevant inclusive development principles. Explains impact of barriers on disability. Documents and explains relevant laws undergirding community inclusion mandate. Describes strategies that foster empowerment and self-determination. Encourages families to greater connection. Explains PRA and maps main stakeholders.	10	30	40
	2	Collects data on current access, identifies the factors contributing to community exclusion, provides arguments to counter negative attitudes. Applies the correct statutory provision to different disability situations and links people to appropriate entitlements, including those hard to reach. Describes empowering features of Programmes. Demonstrates an empowering approach in their own practice, eliciting insights and leadership of people with disability. Encourages village leaders to improve cross-sectoral inclusion. Helps to bring camps and resources to the community. Plans and completes strategic community mapping.	30	20	50
	3	Reports on compliance at the village level. Persuades frontline leaders about responsibilities. Obtains necessary directives from authorities to run campaigns. Facilitates community change by astutely applying legislation. Compares community perspectives on disability and uses these to negotiate for inclusion. Conducts and guides the community through PRA. Supports and builds capacity in DPOs, empowering them to greater self-determination and self-directed advocacy.	50	10	60
A&I	1	Considers a strengths-based approach. Counters superstitious views of disability. Documents relevant statutory laws and provisions. Provides accurate information in response to basic questions. Documents assessment results using prescribed formats, including for Disability Certification/ UDD. Communicates low-stakes information accurately and respectfully. Describes and assists in multi-sectoral interventions. Participates in training family members. Discusses how existing family resources can be used. Explains different strategies for improving wellbeing, identifying situations where these might be needed.	10	30	40

KPA/Phase		Learning Outcomes	Pr	Th.	Total
	2	Identifies less obvious disability conditions. Selects and administers basic assessments that incorporate questions of family strengths. Creates reports, identifies correct referral pathways, and refers appropriately. Communicates sensitive information considerately, using learned strategies. Facilitates collaborative planning and goal-setting. Explains about resources and other relevant information in a timely way. Provides for and train others in basic interventions for a range of needs.	30	20	50
	3	Applies understanding of the 21 disabilities of the RPwD Act 2016 to identify disability, including mental illness. Completes functional assessments, factoring in circumstances impacting accuracy. Facilitates collaborative planning in the family, overcoming resistance. Incorporates strengths into plans and facilitates family resourcefulness in using existing resources. Provides appropriate emotional support and adjusts their own behaviour to provide better support.	50	10	60
PBRP	1	Prepares work plans against prescribed formats. Completes assigned tasks on time. Discusses different skill sets in the team. Describes relevant codes of conduct, laws, ethical requirements. Reflects on responses to disability and identifies possible challenges. Is open to feedback about knowledge gaps and investigates PD opportunities.	10	20	30
	2	Manages workload and adapts plans. Collaborates with others and fosters positive team functioning. Demonstrates responsible and impartial behaviour, respecting confidentiality and backgrounds. Takes responsibility for own wellbeing and makes use of support. Takes advantage of continuing education opportunities.	20	10	30
	3	Plans in consideration of longer-term goals. Manages changing requirements. Engages in positive wellbeing practices and actively support others to do so. Demonstrates impartiality when dealing with opposing viewpoints. Incorporates new practice directives and changes into SOPs and their practice. Sources and undertakes ongoing learning in consideration of particular needs and requirements of the role.	30	10	40
Total			240	160	400

EXAMINATION PATTERN:

The examination pattern with theory and practical break up and summary of Learning Outcomes for each Phase is given on the following page. The entire evaluation of three KPAs constitutes 400 marks – 160 marks for theory and 240 marks for practical. Details are as under:

Sl. No.	KPA	Theory	Practical	Grand Total
1	Inclusive Community Development (ICD)	60	90	150
2	Assessment and Interventions (A&I)	60	90	150
3	Professional Behaviour & Reflective Practice	40	60	100
Total		160	240	400

PRACTICALS

As per course Key Performance Areas (KPAs)

SCHEME OF EVALUATION

As per the provisions made in the Scheme of examinations of NBER, 2018 of RCI

AWARD OF CERTIFICATE

National Board of Examination in Rehabilitation (NBER) will award the passing certificate.

Guidelines for submitting Practical records:

The following guidelines should be followed for submission of practical records for evaluation:

1. A separate practical record should be submitted for each module
2. Hand written practical records should be submitted in Spiral bound
3. Practical records may be prepared in local languages. Such records may be submitted with English synopsis of each assignment certified by Supervisors.
4. Practical records received after last date will not be accepted under any circumstances.