

Diploma In Community Base Rehabilitation (SE-DE)

PG DCBR (SE-DE)*

Duration (Two Years)

INFORMATION BROCHURE

(SYLLABUS & COURSE CONTENT)

A Collaborative programme of



**Madhya Pradesh Bhoj (Open) University
&**



Rehabilitation Council of India

MADHYA PRADESH BHOJ (OPEN) UNIVERSITY

RAJA BHOJ MARG (Kolar Road), Bhopal (M.P.) - 462 016
Ph. 0755-2492095, Fax 0755-2424640

Email:bedsede@gmail.com

www.bhojvirtualuniversity.com

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*SE-DE Represent Programme being Run By Department of Special Education, MPBOU and Approved by RCI

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INTRODUCTION

1 MADHYA PRADESH BHOJ (OPEN) UNIVERSITY

1.1 Introduction

Madhya Pradesh Bhoj (Open) University (MPBOU) was established by an Act of State Legislative Assembly in 1991 to achieve the following objectives:

- to advance and disseminate learning and knowledge by different means, including the use of any communication technology;
- to provide opportunities for higher education to a larger segment of the population and to promote the educational well being of the community in general;
- to encourage the open University and distance education systems.

The MPBOU has been recognized by the **Rehabilitation Council of India (RCI)**, a Statutory Body under the Ministry of Social Justice and Empowerment, Government of India, as the **National Resource Centre for Special Education and Rehabilitation Programmes through Distance Mode** under a Memorandum of Understanding (MoU) signed between MPBOU and RCI in January, 2000 and extended on 31st October 2014, has limited the programme to Madhya Pradesh. B.Ed. Special Education Programme through Distance Mode B.Ed.(SE-DE) is a joint venture of RCI and MPBOU offered through selected Study Centres in Institutions located in different parts of Madhya Pradesh.

1.2 Special Features

- Providing education to the doorsteps of the learner for easy accessibility.
- Flexibility in the system for wider coverage.
- Providing equitable access of quality education for different target group of learners irrespective of their age or status of employment.
- Freedom to the learners to study at his/her own pace and convenience.
- Opportunity to learner to study from his/her own chosen location.
- Omnipresent Education, using emerging advanced communication technologies.
- Sustainable intervention to *develop, upgrade and recycle* human resource for *areas critical to national development* including the *well being of the community*.
- Determination of standard and maintenance of quality in Distance Education in accordance with DEC norms.

The University mainly delivers training and education through distance mode in the form of flexible and open learning. In general, the system consists of a main campus activity in the form of curriculum development and renewal, generation and quality improvement of self instructional materials, preparation of guidelines for implementation and provision of student support services. The main office of the University which manages and operates the Distance Education Programmes is situated in Bhopal. The student will report for the following activities at the ***programme delivery points*** or ***Study Centres***.

- Matters pertaining to admission,
- Receiving of Self Instructional Material,
- Contact classes,
- Receiving assignments for internal (continuous) assessment,
- Submission of completed assignments and Project Reports,

- Practical Training, Tests for Internal Assessment and Term/Session-End Examinations. (*The Centre for the Term End (final) Examination can be clubbed with the Study Centres within the city limit, if the number of students appearing for examinations are very few*), and
- Any academic and administrative problem.

A list of Study Centres activated for B.Ed.(SE-DE) Programme is given in *Programme Guide*.

2 DEPARTMENT OF SPECIAL EDUCATION (DSE)

The main functions of the DSE are to undertake academic activities pertaining to:

- the various aspects of the practice of education as a profession,
- the various branches of special education as an academic discipline, and
- the development of multimedia packages for education and training programmes in the areas of special education.

The academic programmes being offered by the DSE are:

- B.Ed. Spl. Ed. (Disability & Inclusive Education): **B.Ed. Spl. Ed. (Disability Specialization & Inclusive Education) (HI/VI/MR/LD)**
- Foundation Course on Learning Disabilities: **FC-LD (SE-DE)**
- Foundation Course on Education of Children with Disabilities: **FC (SE-DE)**
- Post Graduate Diploma in Community Base Rehabilitation: **PGDCBR (SE-DE)**
- Diploma in Community Base Rehabilitation: **DCBR (SE-DE)**
- Post Graduate Professional Certificate in Special Education: **PGPC (SE-DE) (HI/VI/MR/LD)** and
- Post Graduate Professional Diploma in Special Education: **PGPD (SE-DE) (HI/VI/MR/LD)**.

Future Plans

The DSE plans to conduct

- Up-gradation of skills of personnel who are already working in the area of Special Education.
- Inter-disciplinary Research and Training Programmes for Rehabilitation and Empowerment of Differently Abled.

3 REHABILITATION COUNCIL OF INDIA

In 1992, Parliament passed the **Rehabilitation Council of India Act**, which was notified and became effective from June 1993. The Act casts the following important responsibilities on the Council.

- **Standardization of syllabi for all professionals** needed special education and rehabilitation of the disabled.

- **Recognition of Institutions offering courses for training of rehabilitation professionals.**
- **Maintenance of a Central Register** of all qualified persons in the field of rehabilitation.

The Act also prevents any person delivering services to people with disabilities without acquiring a recognized qualification and treats such an act as a cognizable offence. The **Rehabilitation Council of India** has done a tremendous work **in offering a better quality of life for the disabled** in the last few years.

4 **M o U BETWEEN MPBOU AND RCI**

*Need-based Special Education Programmes through Distance Education Mode are being implemented as Joint National Ventures by Madhya Pradesh Bhoj (Open) University (MPBOU) and Rehabilitation Council of India (RCI) within the framework of a Memorandum of Understanding (MoU) signed between the two in January 2000. This MoU was extended for another five years from January 31, 2004 with **a new thrust and vision** to the unique venture. Under the provision of the MoU the MPBOU acts as the main National Resource Centre for Special Education and Rehabilitation Programmes through distance mode. This is the first ever endeavor in the country to offer special education programmes through distance mode. The extension of MoU signed on 31st October 2014.*

The Special Education Programmes are being developed and implemented *within the framework of the National Goal of INDIA 2020 with a broad perspective of human development in twenty first century in the age of cybernetics and globalization.* The programmes are planned based on the following principles:

- *The national goal of each programme envisages meeting the emerging needs of the Age of Cybernetics and Globalization.*
- The model of curricular transaction of the educational programme is judiciously structured so as to implement as *a viable low-cost economical model without compromising quality.*
- *The educational programmes under implementation are planned as Transparent, Self-Financing and Self-Sustaining Schemes.*

5. **POST GRADUATE DIPLOMA IN COMMUNITY BASED REHABILITATION (PG DCBR SE-DE)***

Introduction

The magnitude of the problem of disability is vast and its impact is very severe on the individual, family and the community. A vast majority of persons with disability live in rural areas. There is a need for grass-root workers to work at the community level. The PG Diploma in CBR aims to meet this need in the society. There are many CBR programmes launched by the government such as DRC, DDRC, and NPRPD, which need well-trained

grass-root functionaries to work at the community level. NGOs implementing CBR are also in need of well-trained grass-root CBR functionaries.

There are programmes for 0-6 children popularly known as ICDS (Integrated Child Development Scheme) and primary education which are encouraging children with disabilities to study in general schools. They need multipurpose CBR workers for early identification, preparation and support after inclusion. The need in the rural, tribal areas is very vast and there is a tremendous need for adequately trained rightly oriented CBR workers. Similarly the nation wide network of Primary health care, (both private and public service) which is the entry point for families needs support of CBR personnel to plan, implement and monitor rehabilitation programmes.

The disability Act that was passed in 1995 emphasizes the need for mandatory inclusion of person with disability in the development programmes / poverty alleviation programmes. This inclusion needs CBR personnel to prepare persons with disabilities to get the optimum benefit from these programmes and also to create awareness among service providers about the rights and potential of person with disabilities. As the entire rehabilitation scenario is rapidly changing from charity based approach to development approach the need for well trained personnel as change agents is intrinsically important.

The proposed programme aims to develop skilled personnel to work at the community level. Young men and women can start rehabilitation services at the community level especially in the rural, tribal areas and urban impoverished areas. This will not only provide rehabilitation services to the un-reached but will create new career opportunities.

This curriculum is designed after amalgamation of two courses for the same purpose i.e., MRW and CBR courses to avoid duplication as well as to give an opportunity to the candidates to acquire some more skills to be able to work in different rehabilitation aspects.

Objectives of the Course

1. Demonstrate and perform effective teaching techniques for training field level functionaries of Community Base Rehabilitation including preparation of course syllabi for them.
2. Plan, Design, Manage, Monitor, and evaluate Community Based Rehabilitation projects in participation with the Community seeking and sustaining community participation in the process of Rehabilitation.
3. Support, defend and clarify to the policy makers the policies needed at the community level for the successful implementation of Community Based Rehabilitation.

5.1 Duration PG DCBR (SE-DE)

- The minimum duration of the programme is 2 Years and maximum 4 Years. Academic Session will be from July to June (in normal circumstances).

5.2 Medium of Instruction and Examination

- **Self Instructional Materials will be available in Hindi & English.**
- Curricular transaction may be in English/Hindi Language.
- Assignments, Practical Records, Internal Assessment Tests, and Project Work Report may be written by the candidate in English/Hindi.
- **Term End Examination will be held in English/Hindi**

5.3 Minimum Eligibility Conditions

Any Rehabilitation personnel with Any Graduation from Recognized University Or Any Graduation Preferably in Life Science (As per RCI Prescribed Norms).

5.3.1 Study Centre-wise List and Admission

On the basis of the Merit List the Study Centre-wise Merit List will be prepared. (*The number of seats per Study Centre is limited to 50*):

- a) The Study Centre where the List contains less than 50 eligible candidates, *they may be treated as selected for admission in that Centre.*
- b) The Study Centre where the List contains more than 50 eligible candidates, *the List of 50 Selected Candidates will be finalized taking reservation principle into consideration. Beyond 50 the candidates will be treated as wait-listed candidates.*
- c) The *Study Centre-wise Lists* will be simultaneously *notified on-line in RCI and MPBOU websites* and the hard copies of the Study Centre Lists will be sent to the concerned Study Centres for admission of selected candidates on notified date. The selected candidates will present themselves on notified date before the concerned Study Centres for admission with supporting documents and Programme Fee of Rs. 20,000/- in the form of a Demand Draft / Bank challan in favour of the **Registrar, MPBOU payable at Bhopal.**

5.7.4 Counseling for Wait-Listed Candidates for vacant seats

The wait-listed candidates will report before the Counseling Committee to take their chance of being selected for admission in Study Centre where seats are available on notified place and date.

5.8 Programme Fee

#Application Form Fee Rs.500/- (Rupees Five Hundred) plus Rs.50/- will be charged as portal charges by M.P. Online.

#Late Fee Rs.250/-

*Programme Fee of Rs.20,000/- (Rupees Twenty Thousand) payable at the time of admission.

The programme fee should be paid only by way of Demand Draft / Bank Challan drawn in favour of the Registrar, MPBOU, payable at Bhopal. Please write on the reverse of the Demand Draft in capital letters:

- (a) PG DCBR (SE-DE) Programme;
- (b) Form No.(auto generated application number while applying online),
- (c) Code Number and Name of the Study Centre which is your first preference where you want to take admission,
- (d) Mobile No. and
- (e) Candidate's Name to ensure proper credit of your fee to the relevant account.

*The fee structure given here is applicable as per RCI guide line. The University reserves the right to change the fee structure given above, if required without prior information.

**PROGRAMME STRUCTURE
&
SCHEME OF EVALUATION**

6. PROGRAMME STRUCTURE

The Programme of Post Graduate Diploma in Community Base Rehabilitation (**PGDCBR-SEDE**) in Distance Education Mode will consist of 19 Courses, 9 Theory Courses and 10 Practical Courses. Different components of the programme in theory and practical courses are given below.

Table – 1 Programme Hour

Descripti on of the Papers Paper No.	Module Title	Theory	Practical	Total
1	Introduction to Disability and Community Base Rehabilitation	170	190	360
2	Locomotor and loss of Sensation Disability Workshop / Training	80	190	270
3	Communication Disability	100	190	290
4	Mental Retardation	110	190	300
5	Visual Disability	110	190	300
6	Mental Illness, Epilepsy and other Disability	75	190	265
7	Teaching Techniques	104	146	250
8	Management Principals	148	231	379
9	Social Work Principal	60	95	155
10	CBR Field Posting	0	450	450
Total		957	2062	3019

Table – 2

Paper No.	Paper Title	Theor y Marks	Internal Assessment	Term End	Practi cal	Inter nal Asses smen t	Ter m End	Total
1	Introduction to Disability and Community Base Rehabilitation	100	40	60	100	40	60	200
2	Locomotor and loss of Sensation Disability Workshop / Training	100	40	60	100	40	60	200
3	Communication Disability	100	40	60	100	40	60	200
4	Mental Retardation	100	40	60	100	40	60	200
5	Visual Disability	100	40	60	100	40	60	200
6	Mental Illness, Epilepsy and other Disability	100	40	60	100	40	60	200
7	Teaching Techniques	100	40	60	100	40	60	200
8	Management Principals	100	40	60	100	40	60	200
9	Social Work Principal	100	40	60	100	40	60	200
10	CBR Field Posting				100	40	60	100
Total		900	360	540	1000	400	600	1900

7. INSTRUCTIONAL HOURS AND ALLOCATION OF MARKS / EVALUATION SCHEME

The total instructional hours for the in Community Base Rehabilitation (**PGDCBR-SEDE**) will be 3019 hours including face to face instruction of 957 hours .The programme has been assigned a total of 1900 marks, which includes 900 marks for Theory and 1000 marks for the Practical Components. In the programme, emphasis is given to the development of practical skills especially in the mentioned area.

In order to be successful in the Programme the candidate has to fulfill the following conditions: the candidate has to secure

- (1) Theory Course, a minimum of 40% marks in each of the two components, i.e.,
(1) Continuous (Internal) Assessment, and, (2) Term End Examinations, separately;
- (2) Practical Course, a minimum of overall 50% marks in both
(1) Continuous (Internal) Assessment, and, (2) Term End Examinations; and,
- (3) Overall 50% of marks in total aggregate i.e. 375 Marks.

Table – 3 : YEAR-WISE DISTRIBUTION OF PAPERS AND EVALUATION SCHEME

Course Structure			Evaluation Scheme									
Courses	Weight age		First Year					Second Year				
	Hours	MM	CIA	TEE	Total	Pass Mark		CIA	TEE	Total	Pass Mark	
						CIA	TEE				CIA	TEE
Theory Courses												
PGDCT 1	170	100	40	60	100	16	24					
PGDCT 2	80	100	40	60	100	16	24					
PGDCT 3	100	100	40	60	100	16	24					
PGDCT 4	110	100	40	60	100	16	24					
PGDCT 5	110	100	40	60	100	16	24					
PGDCT 6	75	100						40	60	100	16	24
PGDCT 7	104	100						40	60	100	16	24
PGDCT 8	148	100						40	60	100	16	24
PGDCT 9	60	100						40	60	100	16	24
PGDCT 10												
Practical Courses												
PGDCP 1	190	100	40	60	100	20	30					
PGDCP 2	190	100	40	60	100	20	30					
PGDCP 3	190	100	40	60	100	20	30					
PGDCP 4	190	100	40	60	100	20	30					
PGDCP 5	190	100	40	60	100	20	30					
PGDCP 6	190	100						40	60	100	20	30
PGDCP 7	146	100						40	60	100	20	30
PGDCP 8	231	100						40	60	100	20	30
PGDCP 9	95	100						40	60	100	20	30
PGDCP 10	450	100								100		50
GRAND TOTAL												
Theory	957	900			500	200 (40%)min				400	160 (40%)min	
Practical	2062	1000			500	250 (50%)min				500	250 (50%)min	
Aggregate : (Attendance minimum 75%in contact programme)	3019	1900			1000	500 (50%)min				900	450 (50%)min	
	2265 (75%)											

8. CONTACT PROGRAMME

The candidate who has been selected for admission to the PGDCBR - SEDE Programme has to report to his/her own Study Centre for registration for admission and induction, collection of Self Instructional Materials and Face-to-Face Contact Programmes. The Calendar of Activities for Face-to-Face Contact Programmes for the entire academic session will be supplied by the Coordinator of the Study Centre. The Programme Schedule of each contact session both for Theory and Practical courses including allotment of assignments and Project Work, conduction of tests will be decided by the Coordinator of the Study Centre and made available to the candidates.

9 THE PROGRAMME SCHEDULE OF CONTACT PROGRAMMES

In all there will be four face-to-face contact sessions during the entire Programme totaling 957 hours or approximately 137 days (@ 7 hours per day) During the first year there will be 483 Hours contact and in second year 483 Hours of contact as detailed in table.

Table – 3: TENTATIVE FRAMEWORK OF THE CONTACT PROGRAMME

Components	Total Hours	TENTATIVE CONTACT SESSIONS CALENDAR			
		First Year		Second Year	
		Contact-I (During Jul-Aug)	Contact-II (During Feb-March)	Contact-III (During Oct-Nov)	Contact-IV (During Feb-March)
1. General Induction and Orientation	30	15		15	
2. 6 Theory Courses : Discussion, Clarification and allotment of assignment	927	234	230	233	230
Total (Hours)	957*	249	230	248	230
* Note:					
(1)The selected candidates of PGDCBR-SEDE Programme will take admission on notified dates in respective allotted Study Centre. During the Induction Programme Self Instructional Materials will be supplied and modalities of curricular transaction will be explained by the Co-coordinator.					
(2)The Study Centre will supply the calendar of activities for two Contact Programme of 68 days each in every year. Each Contact Programme of 34 days will be continuous and <i>should not be split</i> .					
(3)The Term End Examination in Practical Papers will be completed during the Second/Fourth Contact Programme.					
(4)The Term End Examination in Theory Papers will be held during the notified dates which will be confirmed through					
Notification to Study Centres as well as in MPBOU website www.bhojvirtualuniversity.com Extra hours//days will be provided for TEE in Theory beyond Contact programme hours/days					

9.1 ASSIGNMENTS AND PROJECT WORK REPORTS

The assignments as well as the Project Work Report are to be submitted at the Study Centre after completion and within the date prescribed. Late submission will lead to no credit being given to the assignment and Project Work.

9.2 THEORY AND PRACTICAL TESTS DURING CONTACT SESSIONS

Two Tests for each Theory Course and Practical Course have been prescribed. The student has to appear in these Tests conducted during contact sessions.

10. ELIGIBILITY FOR APPEARING IN TERM END EXAMINATION

Every student registered to PGDCBR -SEDE shall be eligible to appear in the term-end examination every year subject to the following conditions.

- (i) The student has at least attended 75 per cent of the prescribed contact classes organized at the Study Centre. (to be certified by co-coordinator of the study centre)
- (ii) **Practical examination:** Students should submit practical record for each module duly certified by the supervisors.

Practical records: 20%; Supervisor's report: 20%; Practical examination: 60%

- (ii) Carried all the requirements for the Programme:
 - Undergone practical training.
 - Completed and submitted prescribed number of assignments.
 - Appeared in Theory and Practical Tests conducted during Contact Sessions.
 - Completed Project Work / CBR and submitted the Report.
 - Completed prescribed number of Teaching Practice Lessons in optional school subjects and in opted disability area.
- (iii) Student has not caused any act of indiscipline at the Study/Cluster Centre.
- (iv) The University will be able to consider a student for granting permission to appear in the term-end examination, subject to the fulfillment of the above prescribed conditions by way of the Eligibility Certificate, Completion Certificate and no objection certificate received by the MPBOU from the Coordinator of the Study Centre and a certification to the effect that the student fulfills all the conditions mentioned above and those which may be prescribed by the University from time to time.
- (v) Admit Cards will be issued by the University through the Coordinator of the concerned Study Centre. And it will be the responsibility of the students to collect them from there.

10.1 EXAMINATION DATES

- After the completion of the Programme requirements the University will declare the dates of term end examinations every year.
- University reserves the right to conduct the Term End (final) examination at any place within a city limit. However, the students of a centre can be clubbed with the other Centres within the city limit of the State, in case of very few number of students appear for the examination.

10.2 AWARD OF DIVISION TO SUCCESSFUL CANDIDATE

- A successful candidate of the PGDCBR (SE-DE) Programme shall be placed in the division in accordance with the following scale/categories on the basis of aggregate marks obtained in all the subjects taken together:
- 50% or above but less than 60% marks : Second Division
- 60% or above marks : First Division
- A successful candidate who has secured 75% or more marks in any Theory Paper will get Distinction in that Paper.

11 Provision for Unsuccessful Candidates

11.1 Candidates who are declared failed shall be permitted to appear in all the Theory and Practical courses in which they have failed at subsequent examination(s) subject to the restriction of period mentioned in clause 3 Note: ***The Internal Assessment Marks in which the candidate has passed will be carried over.*** After the expiry of this period the students will have to seek fresh admission and no credit will be carried over.

11.2 Candidates eligible under the above provision and willing to appear in the subsequent examination(s) in any theory/practical courses(s) shall have to submit application on prescribed form together with a copy of statement of marks obtained at the preceding examination and the prescribed reappearing examination fee through the Coordinator of the Study Centre so as to reach the university by the date notified for subsequent examination(s).

11.3 A candidate will have to clear all courses in a minimum 2 Years & maximum period of 4 Years after admission.

12 SELF INSTRUCTIONAL PRINT MATERIAL

Self instructional print material covering the course contents in theory and practical structured into blocks and units as per programme structure will be provided to the candidate by the university.

13 AUDIO AND VIDEO PROGRAMMES

The audio and video Programmes are supplementary, meant for clarification and enhancement of understanding. These are used when every necessary during contact sessions.

COURSE OF STUDY

PG DCBR (SE-DE)

BLOCK-1: INTRODUCTION TO DISABILITY AND COMMUNITY BASED REHABILITATION

Unit 1 - Disability and Development

1.1.1	To understand the concept of disability, definitions and classification.
1.1.2	To analyze the association between poverty and disability and justify the need to include disability in the development programmes.
1.1.3	To critically analyze global, national and local legislation concerning disabilities.
1.1.4	To discuss the history of rehabilitation.

Unit 2 - Magnitude and Prevention of Disability

1.2.1	To understand the difference between incidence and prevalence of disability and understand the basic principles used in the development of incidence and prevalence of disability.
1.2.2	To design a database on prevalence of disability using UNDP rate and population census data.
1.2.3	To critically analyze the existing data available on incidence and prevalence of disability.
1.2.4	To understand the basic principles in designing, survey of person with disability and in the community.
1.2.5	To understand and apply the skills required in developing screening tools.
1.2.6	To critically analyze the programmes implemented by the government for the prevention of disabilities and to analyze the association between nutrition and disability.
1.2.7	To critically analyze contributing factors such as maternal care, accidents, ageing and other issues.
1.2.8	To critically analyze the role of community and cultural factors in the prevention of disabilities.

Unit 3 - Introduction to CBR

1.3.1	To understand the basic principles of Community Based Rehabilitation.
1.3.2	To analyze the difference between Community Based Rehabilitation and Institutional Based Rehabilitation.
1.3.3	To critically evaluate existing poverty alleviation/ developmental programs and the inclusion of Community Based Rehabilitation into these programmes.
1.3.4	To critically analyze how the Community Based Rehabilitation strategy would facilitate safeguarding the rights of persons with disabilities.
1.3.5	To understand and analyze the relevance of Community Based Rehabilitation in different socio-cultural and economic conditions such as urban, rural, tribal, and hilly regions.
1.3.6	To understand and critically analyze different approaches in Community Based Rehabilitation such as single disability, multi-disability, single sectoral, and multi-sectoral approaches.
1.3.7	To critically examine the need for different referral systems in Community Based Rehabilitation.
1.3.8	To critically analyze on using existing resources of the community in sustaining Community Based Rehabilitation.
1.3.9	To understand and analyze building Community Based Rehabilitation using existing development programmes such as primary health, primary education, rural development and corporate sectors.

Unit 4 - Independent Living

1.4.1	Developing skills for sustaining social relationships with one's partners, friends, parents, spouse and community members.
1.4.2	Assisting and supporting family.
1.4.3	Identifying trades traits in which the person can be gainfully employed.
1.4.4	To plan vocational training in the chosen traits.
1.4.5	To plan placements, marketing linkages, and bank loans to start self and group employments, to set-up micro credit groups of persons with disabilities and/or to include persons with disabilities in the existing self-help micro credit groups.

Unit 5 - Common underlying principles, strategies and skills used in CBR

1.5.1	To identify children using screening tools viz. Denver development screening test, screening forms with difficulties in seeing, moving, learning, communication, hearing and to prepare functional assessment using CRD (Criterion Reference Data).
1.5.2	To plan an early intervention program using Portage.
1.5.3	To understand the underlying behavioral technique and apply the same in teaching and learning.
1.5.4	To assess the needs of persons with disability using the need assessment staircase given in the WHO manual.
1.5.5	To assess and plan prevocational training using packages such as TALC (Training Adolescents to Live in the Community).

ANNEXURE 1 B**PRACTICAL OF BLOCK 1: INTRODUCTION TO DISABILITY AND
COMMUNITY BASED REHABILITATION**

Unit 1 Disability and Development

1	Prepare 3 discussion reports with community members and service providers such as special schools, integrated schools, inclusive schools, policy makers such as Panchayath Raj, elected representatives, district disability welfare officers, and PHC doctors, to understand their attitudes towards persons with disabilities and critically analyze and report the attitudinal differences.
2	Prepare 3 discussion reports with the organizations of persons with disabilities, self-help organizations of persons with disabilities, organizations of women with disabilities, organizations of aged disabled persons and parents' organizations, and document the vision, mission, goals, objectives, activities and impact.
3	Visit rural development programmes/poverty alleviation programmes and report the number of persons with disabilities who are included in the poverty reduction program and critically analyze why people with disabilities are not fully included in poverty alleviation programmes.

Unit 2 - Magnitude and Prevention of Disability

1	Conduct mapping of a community with a population of 1000 and report the magnitude of disability.
2	Visit primary health care providers and document the programmes initiated for the prevention of disability and the number of people benefited under these programmes.
3	Critically document the cultural factors in a given community on various issues concerning prevention of disability such as child rearing practices, consanguineous marriages, faiths and beliefs in managing early childhood illness, age of marriage of girls, and attitudes towards safe motherhood practices.

Unit 3: Introduction to CBR

1	Visit CBR programme, a. Critically document the vision, mission, goals, objectives, budgets, and strategies of the programme and critically analyze to what extent persons with disabilities are included in the developmental programmes (can be anywhere urban or rural). b. Critically document the awareness of persons with disabilities and families of persons with disabilities of their rights to be included in the mainstream society, namely primary health care, primary education, rural developmental programmes, and employment opportunities using the existing facilities. c. Critically analyze the relevance of single disability, cross disability, and single- and multi-sectoral approaches in CBR. d. Document the referral services used by the CBR and identify strengths and weaknesses of the resources available. e. Analyze various strategies adopted by NGOs to mobilize resources for CBR and various measures taken to sustain CBR. f. Analyze and document to what extent women with disabilities, children below 5 years, children in the age group of 6-14, and disabled persons are included in the CBR programme.
2	Visit a residential institution and compare the quality of life of persons in the residential institution and persons with disabilities in a CBR program.

Unit 4- Independent Living

1	Visit micro-credit groups and critically analyze to what extent persons with disabilities are benefited from the micro-credit groups.
2	Visit self-help groups of families and adults with disabilities; document and visit 5 families of adults with disabilities, covering one in each disability. Document the participation of a person with a disability in supporting the family activities.

Unit 5: Common underlying principles, strategies and skills used in CBR

1	Conduct a screening of children in an Anganwadi center using portage and Denver Development screening tools.
2	Establish baselines and plan half-yearly, quarterly, monthly, weekly and daily individual educational programmes using Portage CRD in all areas of development to a minimum of 6 children below 5 years of age (a. 3 below the age of 0-3 years; b. 3 below the age of 3-6 years).
3	Prepare a report clearly stating the following behavioral techniques and their applications: Reward assessment Reward training Task analysis Prompting- verbal, gestural, physical Shaping Imitation Timeout Discrimination and generalization Over-correction ABC Analysis
4	Visit a special school and identify behavioral modification techniques used in teaching, learning and managing difficult behaviors, and prepare a critical report.
5	Visit a special school and prepare a need assessment staircase for at least 10 persons with disability referring to the WHO manual CD.
6	Establish a baseline and prepare a prevocational plan using packages such as TALC for at least 10 persons above 16 years with different disabilities.

BLOCK -2 LOCOMOTOR AND LOSS OF SENSATION DISABILITIES

Unit 1- Basic concept, and assessment

2.1.1	<p>To monitor the different areas and developmental milestones of a child in the area of motor/ visual/ hearing/speech and cognitive development and determine how they are inter-related in the overall functional development of that child.</p> <ol style="list-style-type: none">To summarize the subject of developmental pediatrics as related to disability prevention and rehabilitation, to educate how early detection of developmental delay can be made by monitoring growth, development and other related parameters and its remedial management.To explain the common childhood disabilities and discuss the basic principles involved in the rehabilitation of common childhood disabilities.
2.1.2	<p>To identify common motor difficulties and analyze the causes.</p> <ol style="list-style-type: none">To explain the causes leading to Locomotor disabilities and summarize its various preventive measures initiated by the government.To identify and assess the medical and surgical needs.
2.1.3	<p>To understand the characteristics of different Locomotor disabilities and plan rehabilitation interventions.</p> <ol style="list-style-type: none">To understand the basic principles of human anatomy-skeletal system, muscular system and nervous system.To analyze the different characteristics of various Locomotor disabilities in different age groups.<ol style="list-style-type: none">1.Polio2.Muscular dystrophy3.Spina bifida4. Cerebral palsy5.Congenital deformitiesTo assess the individual needs of persons with Locomotor disability.To identify and arrange appropriate referral services.To assess and analyze different assistive devices required to meet individual needs.
2.1.4	<p>Chronic pain of joints and muscles. To understand characteristics, causes, rehabilitative management of the following.</p> <ol style="list-style-type: none">1. Arthritis management.2. Paralysis.3. Fractures (simple & compound).4. Leprosy (person disabled due to leprosy).5. Amputees due to diabetes & accidents. <p>(To understand the characteristics, causes and rehabilitative management of the above)</p>

Unit 2-Interventions and role of family and the community

2.2.1	<p>To develop positive attitude of the community towards understanding the needs of persons with Locomotor disability through:</p> <ul style="list-style-type: none"> • Early Identification. • Education. • Prevocational Training. • Vocational Training. • Employment Opportunities. • Barrier free Environment. • Independent Living.
2.2.2	<p>To understand and apply rehabilitation technology using CBR strategies</p> <ol style="list-style-type: none"> a. Can explain the basic principles in developing orthosis/orthoitic devices. b. Can explain the basic principles and apply skills necessary to device prosthetic devices. c. Can demonstrate the various developmental aids and use the skills to develop developmental aids using locally available materials.
2.2.3	<p>To understand and apply rehabilitation skills using the WHO manual (training of persons with difficulties in moving).</p> <ol style="list-style-type: none"> a. To develop screening tools to identify locomotor disabilities. b. To understand basic principles of physiotherapy. c. To understand basic principles of Occupational therapy. d. To arrange for medical assessment, surgeries, plan and implement therapies as required. e. To arrange counseling services as and when required.. f. To develop barrier free environment in schools, workplace for increased functioning.

Unit-3 Workshop Training

2.3.1	<p>To understand the underlying principles in organizing a workshop to develop assistive devices.</p> <ol style="list-style-type: none"> a. To assess the individual needs. b. To design and interpret technical designs. c. To understand the skills required to take measurements. d. To design assistive devices. e. To develop assistive devices using locally available material or fitting the assistive devices already available.
2.3.2	<p>To understand the basic principles on tools and machines required in the workshops.</p> <ol style="list-style-type: none"> a. To list out tools and machines required and their functions. b. To demonstrate use of machines and tools in developing materials. c. To develop miniature models of different assistive devices such as gaiter, walker, parallel bar, wheel chair, prone board, standing frame and corner seat.
2.3.3	<p>Barrier free environment</p> <ol style="list-style-type: none"> a. To design barrier free school, workshop, toilets etc. b. To understand and use low cost technologies such as paper technology, mud seats, plastic buckets, bamboo, and other materials. c. To explain the use and minor repairs of hearing aids. d. To design white cane. e. To be aware of various schemes and procedures to procure assistive devices from the government.

ANNEXURE 2 B**PRACTICAL OF BLOCK 2: LOCOMOTOR AND LOSS OF SENSATION DISABILITIES**

Unit 1- Basic concept, and assessment

1.	Visit an orthopedic hospital or a rehabilitation center: <ul style="list-style-type: none"> • Document different types of locomotor disabilities. • Document services extended to persons with different types of locomotor disabilities.
2.	Prepare a simple cardboard jointed body figure (flexion to measure the angle of deformity of the various joints).
3.	<ul style="list-style-type: none"> • Demonstrate and document how to measure the muscle power of different grade spasticity as mild, moderate and severe. • Prepare a practical record on correct positioning and movements of a child with spasticity, a child with polio deformities, a person with amputated limbs.
4.	Interview a person with polio/muscular dystrophy/spina bifida, spinal injury, cerebral palsy, congenital deformities and assess their individual needs for enhancing their functioning.

Unit 2-Interventions and role of family and the community

1.	Visit inclusive anganawadi centers, schools and special schools and document the programme planned by the schools for children with locomotor disabilities.
2.	Visit a pre-vocational and a vocational training center and document various adaptations made, for training persons with locomotor disabilities in order to develop a working environment friendly to their needs.
3.	Visit three public buildings and document various measures taken in order to make the environment barrier free.
4.	Visit three families with a member with disability and document various measures taken to make home environment friendly in all the places including the toilets, kitchen, living rooms, bed room etc.

Unit 3 - Workshop Training

1.	Visit an orthotic and prosthetic workshop and prepare a practical session required on various machines and tools and its purpose.
2.	Prepare miniature models of all the developmental aids such as gaiter, parallel bars, walkers, prone board, standing frames, corner seat, adapted spoons, tumblers etc (applying latest technique).
3.	Design a calliper and wheel chair by taking measurements of individuals with locomotor disabilities.

BLOCK-3: COMMUNICATION DISABILITIES

Unit 1- Speech and language development and the interventions

3.1.1	<p>To develop an understanding of child's speech and language</p> <ul style="list-style-type: none">a. Can understand the meaning of communication, communication chain and assesses how communication can break down.b. Can explain the process of language development in children and language break down.c. Can rate the priorities in communication and language problems.d. Can demonstrate an understanding of the psychosocial implication of hearing disability.e. Can assess a child's speech and language using a detailed communication assessment tool like speech and language rating scales corresponding to different age groups.f. Can identify to issues related to hearing and communication disabilities.
3.1.2	<p>To understand the causes, prevention and early identification of hearing loss and types of communication disability and the interventions</p> <ul style="list-style-type: none">a. Can explain the anatomy of ear and physiology of hearing.b. Can explain the causes of hearing disability and its classification.c. Can explain the prevention of hearing disability.d. Can identify and execute preventive measures.e. Can plans and executes various activities with early-identified children.f. Can explain childhood lack of fluency, stammering and the intervention modalities.g. Can analyze the causes and problems of aphasic patients and discusses the management of aphasia.h. Can analyze the causes and problems of dysenteric patients and interventions.i. Can analyze the causes and problems of other articulation disorders and the management of the same.j. Can analyze the effects of hearing impairment on various areas like cognition, language etc.
3.1.3	<p>To assess the hearing and speech of children/adults with disabilities and plan appropriate interventions</p> <ul style="list-style-type: none">a. Can discuss various investigations for the deaf, to justify/critically evaluate them.b. Can perform pure tone audiometry and to evaluate an audiogram.c. Can observe and document auditory behavior/responses.d. Knows how to make optimum utilization of aids and appliances.e. Can compare and contrast bliss symbol/Makaton charts for a few communication-disabled clients as part of project work.f. Can explain common problems of hearing aids during its usage and maintenance of ear moulds.g. Can advice referral activities for multiple disabled.

Unit 2- Education of children with communication disabilities- Family and community and their role in rehabilitation

Sl.No.	Objective
3.2.1	<p>To develop an understanding of the meaning, scope, structure and function of education of children with communication disabilities.</p> <ol style="list-style-type: none"> a. To understand and analyse the assets of a communication disabled child and critically evaluate the need for alternative and augmentative communication. b. To recognize and improve functional communication skills in disabled children. c. To adapt a textbook for a hearing impaired child. d. To assess language. e. To apply different methods of teaching language. f. To understand and interpret standardized test results. g. To explain techniques of teaching language. h. To plan and execute teaching for various grammatical aspects of the concerned language. i. Understands the concept of curriculum and its relevance. j. To enumerate the nature, scope, strengths and limitations of existing curriculum. k. To explain areas of curriculum planning. l. To conduct and manage school examination. <p>To apply behavioural modification skills in planning, teaching, learning and management of difficult behaviour.</p>
3.2.2	<p>To understand Family and community and their role in rehabilitation of disabled</p> <ol style="list-style-type: none"> a. To discuss the training of persons with communication disabilities using the TCPD (WHO manual), Portage, TALC, Joyful Inclusion Pack, Disabled Village Children, Nothing about us without us manuals. b. To create an appropriate home and school environment for the development of speech. c. To guide the family and community for better rehabilitation. d. To educate parents about the importance and use of a hearing aid and it's proper fitting mechanism. e. To compare the various hearing aids that are available. f. To demonstrate ways and means of empowering parents of children with communication disabilities. g. To guide and counsel persons with communication disabilities and their family. h. To explain various concessions and facilities for persons with communication disabilities and their family. i. To mobilize various sources and schemes which are beneficial for persons with communication disabilities. j. To develop parent – professional partnership.

BLOCK-3: COMMUNICATION DISABILITIES

Unit 1: Speech and language development and the interventions

Sl.No	Chapter 2 Assignment
A1.	Visit a special school for children with communication disabilities and prepare a report on various activities proposed for communication disability.
A2.	Visit early intervention centres for children with communication disabilities and document the process of early identification and intervention.
A3.	Assess and document the language development of 5 children with hearing loss, using Portage language development checklist, CRD.
A4.	Visit an ICDS centre and document the number of children with ear discharge, difficulty in speech, hearing and language development using screening forms.
A5.	Assess 5 children in the age group of 0-5 and document the development in the following areas- socialization, self-help, cognitive development, language development and motor development using Portage CRD.
A6.	Visit inclusive and integrated schools and document various adaptations made in the curriculum content, materials, methods and evaluation procedures to include children with communication disabilities.

Unit 2: Education of children with communication disabilities- Family and community and their role in rehabilitation

Sl.No	Chapter 3 Assignment
A7.	Visit a department of audiology to see different tools used for investigation of hearing loss and conduct pure tone audiograms. (Incorporate one audiogram in your practical record)
A8.	Report audiometry results for children in the age group of 3-5, 5-13 years and adults using conventional method. Using Trinetra software, conduct audiometry for 10 people with different communication problems and document the report.
A9.	Prepare a list of different types of hearing aids available and its basic maintenance and steps involved in repairing. Visits a session in which ear moulds are made and note you observations.
A10.	Conduct speech therapy for 4 children in the preschool age and primary school age and document the results.
A11.	Prepare a list of sign languages used in the local community such as, bliss symbols, makaton charts and record the languages used by 4 persons with communication disabilities.
A12.	Prepare a report on at least one person whose speech is affected because of paralysis and plan an intervention program.

BLOCK 4: MENTAL RETARDATION

Unit 1- Basic concept and assessment

4.1.1	<p>To develop an understanding of the basic concept of disability.</p> <ol style="list-style-type: none">a. To demonstrate an understanding of the nature and patterns of normal growth and development.b. To demonstrate an understanding of factors influencing developmental delay.
4.1.2	<p>To demonstrate an understanding of the concepts, etiology and prevention of Mental Retardation.</p> <ul style="list-style-type: none">• To describe the development of intelligence, the importance of IQ tests in Mental Retardation and classify children with mental retardation.• To demonstrate an understanding of the psycho-social implication of disability.• To demonstrate various screening procedures in early detection of Mental Retardation.• To design screening forms for Community Based Rehabilitation Workers, Community Nurses and Teachers.• To critically analyze the limitations of the various commonly used tests and procedures for the assessment of development and Mental Retardation.• To justify the need for the Psychological and Psychiatric Assessment and occasional referrals in Mental Retardation.• To demonstrate an understanding of multiple disabilities.
4.1.3	<p>To develop an understanding of the meaning, scope, structure and function of education of children with Mental Retardation.</p> <ul style="list-style-type: none">• To understand the historical perspective of special and inclusive education for children.• To demonstrate insight into the concept of psychology and its importance in teaching learning process.• To assess the 'learning difficulties' of children with Mental Retardation and compare these with those of Learning Disability without Mental Retardation, autism and other disabilities.• Discuss 'Curriculum Development and Teaching Techniques' for children with Mental Retardation.• To critically evaluate institutionalization and recognize the associated behavior and other problems and its management.• To discuss the education of children with Mental Retardation at community level through their integration in normal schools and analyze the possible difficulties and suggest remedial measures.• To analyze the role of toys, play and recreation in the education of children with Mental Retardation.• To demonstrate competency in selection, preparation and uses of appropriate TLM (Teaching Learning Material), functional aids and technology in various settings.• To demonstrate understanding of principles of teaching and conditions that facilitate teaching learning activities.• To demonstrate knowledge of language, speech and communication development and identify deficit areas, plan and implement classroom activities to enhance speech, language and communication.• To demonstrate competency in selecting suitable functional literacy and numeracy skills across ages.• To demonstrate competency in exposing the students with Mental Retardation and additional disability to a variety of concrete experiences in functional academics with the aim to ensure independence in the area.• To select strategies for teaching primary, secondary and pre-vocational levels.

Unit 2- Interventions and role of family and the community

4.2.1	<p>To demonstrate an understanding of the various interventions in Mental Retardation across age groups and severity.</p> <ol style="list-style-type: none"> a. To categorize the assets, needs and management of Children with Mental Retardation/adults in a community through task analysis. b. To screen and identify persons with mental retardation and associated disabilities and refers them to appropriate agencies for service. c. To demonstrate an understanding of the various social skills appropriate to age, time and place and its relevance to teaching children with Mental Retardation and additional disabilities. d. To narrate suitable leisure and recreational skills suitable for persons with Mental Retardation and additional disabilities. e. To demonstrate competency in identifying strength and limitation of students with Mental Retardation and additional disabilities and prepare a program to enhance the skills to be used for employment. f. To demonstrate competency in identifying and understanding problems related to occupational therapy, physiotherapy and speech therapy. g. To demonstrate competency in identifying specific behavior problem and explaining techniques for modifying behavior. h. To evaluate speech and communication problems of Mental Retarded children and the importance of speech therapists and communication therapists in Mental Retardation. i. To demonstrate understanding of various self help activities across ages and levels of mental retardation. j. To discuss the training of Persons with Mental Retardation using the TCPD (WHO manual), Portage, TALC, Joyful inclusion Pack, Disabled Village Children, Nothing about us without us manuals.
4.2.2	<p>To understand the role of family and community and their role in rehabilitation of children and persons with Mental Retardation.</p> <ol style="list-style-type: none"> a. To demonstrate the importance of working with parents in the rehabilitation of children with Mental Retardation. b. To demonstrate behavior modification techniques to a groups of parents/CBR workers. c. To discuss and critically analyze the importance of ADL/skill training in mental retardation and the possibility of independent living for persons with Mental Retardation. d. To discuss and evaluate the role of non-government voluntary agencies in the management of Mental Retardation in community based rehabilitation. e. To summarize the vocational opportunities for adolescents/adults with Mental Retardation in the community and critically evaluates the role of Vocational training centers. f. To discuss the sexuality of persons with mental retardation, the need for counseling of persons with Mental Retardation and their parents, and is able to demonstrate parent counseling sessions to a group of community health nurses/CBR workers. g. To discuss the support to marriages in persons with Mental Retardation, critically analyzes sterilization and family planning procedures for persons with Mental Retardation. h. To discuss support to families and communities towards acceptance of persons with mental retardation and associated disabilities. i. To critically evaluate the role of medicines in Mental Retardation. j. To narrate the suitable leisure and recreational skills suitable for persons with Mental Retardation and additional disabilities.

ANNEXURE 4 B**PRACTICAL OF BLOCK 4: MENTAL RETARDATION**

Unit 1- Basic concept and assessment

1	Identify children for delays in development below 3 years in a ICDS center using DDST and screening forms.
2	Identify delays in development using portage CRD for at least 10 children in the age group of 0-5 years.
3	Visit a special school for mentally handicap children and document the program planned for at least 10 children in different age groups that is below 3 years, 3-6 years, 6-14 years as well as the strategies used in these schools in education of children with Mental Retardation.
4	Visit an integrated or inclusive school and list out various adaptations prepared by the teacher in content method, materials and evaluation of children with Mental Retardation.
5	Visit a psychological assessment centre and prepare a report on various standard assessment tools used in measuring intelligence.

Unit 2- Interventions and role of family and the community

1	Prepare a need assessment chart for 10 persons of different age groups that is below 3 years, 3-6 years, 6-14 years and adults with Mental Retardation
2	List 25 strengths and 25 weaknesses of at least 5 persons with Mental Retardation and list 3 difficult behaviors and plan behavior intervention using behavior modification techniques. Also prepare a document on the same.
3	Prepare a multi sensory learning material kit using locally available materials to teach children/persons with Mental Retardation. (Refer to TCPD play activities, portage materials)
4	Assess 5 persons above 14 years to understand the prevocational needs and plan a intervention and document the same using TALC.
5	Visit a rural development or CBR program and document various intervention planned for persons with Mental Retardation
6	Visit parent organizations for Mentally Handicapped and critically analyze the benefits of programs such as National Trust, PWD Act, and other various schemes meant for people with Mental Retardation.
7	Visit counseling sessions for parents with Mental Retardation and critically analyze counseling support given to parents with children with Mental Retardation with reference to counseling principles stated in Tred Gold theory
8	Interview women with Mental Retardation and critically analyze various problems which is specific to them and plan intervention strategies to meet specific needs of women with Mental retardation

BLOCK 5: VISUAL IMPAIRMENT

Unit 1 - Basic concept, and assessment

5.1.1	To develop an understanding of the basic concept of the disability <ol style="list-style-type: none">Demonstrate an understanding regarding the nature of growth and development of visually impaired childrenDemonstrates an understanding of the psycho-social implications on personality development of visually impaired individuals
5.1.2	To Demonstrate an understanding of the concepts, etiology and prevention of visual impairment <ol style="list-style-type: none">Analyzes development of vision and designs simple vision screening test for early detection of visual impairmentDefines visual disability and distinguishes the different types of visual disabilities and functional visual disabilitiesIdentifies common causes of visual disabilities noticed at the community level – socio-economic and medicalDistinguishes between curable/incurable and treatable/untreatable visual disabilitiesAssesses the prevalence of visual disabilities in a community, and predict the magnitude of visual disabilities in India/WorldSummarizes the services available in India for visually disabled persons and compares the contrast these with those available in other developing/developed countriesAnalyzes the definition and terminologies of low visionIs competent in low vision assessment
5.1.3	Family and community and their role in rehabilitation of children and persons with visual impairment <ol style="list-style-type: none">Recognizes and discusses the role of the family and community in the rehabilitation of persons with visual impairmentAppraises a group of village health workers, secondary school students, village health worker and educates them about common eye problems, its diagnosis and management, orientation and mobility.Appraises a parent group about the role of nutrition in vision/vision disabilities and plans a balanced diet using available resources in the community to prevent visual disabilities due to malnutritionCritically analyzes the barriers in the communityOutlines the vocational rehabilitation avenues available in the community for persons with visual impairment Outlines the inter-personal and sexual problems of persons with visual impairment and justifies the need for counseling

Unit 2-Interventions and role of family and the community

5.2.1	<p>To demonstrate an understanding of the various interventions in Visual Impairment</p> <ol style="list-style-type: none">a. Evaluates the needs/assets of a visually disabled child/adult/aged and outlines a rehabilitation management programb. Summarizes self help skills for visually disabled persons and to design an architectural barrier free kitchen and living quarters for a visually disabled personc. Outlines and evaluates the available and recent technology for the visually disabled persons including computers and its importance at the community leveld. Distinguishes the various low vision aids (plans, prepares and uses) that are available and that could be beneficial for visually disabled personse. Discusses the training of persons with visual impairment using the TCPD (WHO manual), Portage, TALC, Joyful Inclusion Pack, Disabled Village Children, Nothing about us without us manuals.
5.2.2	<p>To develop an understanding of the meaning, scope, structure and function of education of children with visual impairment</p> <ol style="list-style-type: none">a. Analyzes the factors affecting learning in children with visual impairmentb. Analyzes the policies, special legislation and special programs relating to education of children with visual impairmentc. Describes responsibilities of various agencies in educating children with visual impairmentd. Demonstrates general and specific aims of educating children with visual impairmente. Compares and contrasts standard versus modified curriculum and outlines the need for modified curriculum in the education of children with visual impairmentf. Critically evaluates the special needs of pre-school children with visual impairmentg. Explains the basic strategies of education of the multiply disabled like the Deaf-Blind, children with visual impairment and cerebral palsy, children with visual impairment and mental retardation, children with visual impairment and locomotor disabilitiesh. Explains the curricular adaptations of materials and presentationsi. Explains lesson planningj. Explains the basic features of concepts, individual differences and counselingk. Explains about the educational needs of gifted children with visual impairmentl. Develops an understanding of creativity and ways of promoting creativity among children with visual impairment at elementary/primary/secondary levelm. Develops an understanding to teach physical education, creative arts

	<p>curriculum for children with visual impairment</p> <ul style="list-style-type: none">n. Enumerates the concessions and facilities for the child with visual impairmento. Develops methodology in teaching daily living skills to children with visual impairmentp. Demonstrates maintenance of various school recordsq. Explains the fundamentals of Braille and other languages of the blindr. Demonstrates abilities to teach – listening, speaking, reading and writing to children with visual impairments. Demonstrates procedures, principles and methods of sensory training
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BLOCK 5: VISUAL IMPAIRMENT

Unit 1: Basic concept, and assessment

A1.	Visit a school for visually impaired children and document their program strategy.
A2.	Visit an Anaganwadi centre, primary school and screen children using screening forms, Snellen charts, Trinetra software and prepare a report children who have visual difficulties.
A3.	Visit an eye hospital and document various tools and techniques used in medical intervention of persons with visual impairment.
A4.	Prepare a report for at least for 4 children below 6yrs of age with visual impairment and plan an early intervention program.

Unit 2: Interventions and role of family and the community

A5.	Prepare a report on a CBR programme on various strategies, interventions they have planned for visually impaired persons and its impact.
A6.	Prepare a brief report minimum 5 applying the following skills: <ul style="list-style-type: none"> • Precane skills • Sighted guide techniques • Use of clues and landmarks for efficient mobility • Use of long cane techniques • Preparation of tactile and auditory maps • Stimulation under blind fold
A7.	Collect and transcribe 2 stories/poems/episodes into Braille.
A8.	Plan and implement 5 individual educational plan (IEP) for visually impaired persons.
A9.	Visit integrated school and prepare a report on various adaptations, teachers have made in the contents, methods, materials and evaluation.
A10.	Prepare, plan and implement the following skills for three persons with seeing difficulty: <ol style="list-style-type: none"> a. Toilet training b. Bathing c. Dressing d. Personal grooming e. Eating skills f. Posture and gait collection
A11.	Plan and implement the following activities for 3 persons with difficulty in seeing-games with adaptation, art such as clay, plasticine modelling, pottery, group singing, drama etc.
A12.	Plan and implement IEP for 3 children with low vision and person with deaf-blindness.
A13.	Plan and implement for at least 5 children to use Taylor frame, abacus.
A14.	Visit a special school/ resource centre and prepare a record on all the assistive devices such as Braille's, Braille scales, Stylus, Abacus, Taylor frame, Thermoform machine, geometrical aids, magnifiers, simulating glasses, Jaws software, Trinetra software and other equipments and materials with their design, description and use of material.

BLOCK 6: MENTAL ILLNESS, EPILEPSY AND OTHER DISABILITES

Unit 1- Mental health and management

6.1	<p>Mental Illness</p> <p>To discuss issues related to mental health and trace the history of community mental health services.</p> <ol style="list-style-type: none">To distinguish common community mental health problems and to analyze the causes.To identify and analyze various causes of mental illness.To critically analyze cultural and environmental factors influencing mental health.To critically analyze the advantages and disadvantages of institution based and community based services for mentally ill persons.To understand and apply behaviour modification techniques and ABC analysis.To critically analyze existing social stigma attached and develop awareness programs using mass media such as art, music, puppet, theatre, street theatre, dance, drama etc.To plan prevocational, vocational training and employment opportunities using the existing developmental programmes.To critically analyze the causes for prevention and rehabilitation of other psychiatric disorders such as suicidal tendencies, drug addiction, alcoholism etc.To design a curriculum to train family trainers, community workers, school teachers, doctors on mental health care.
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Unit 2- Epilepsy

6.2.1	<p>Epilepsy</p> <p>To understand the causes and different types of epilepsy</p> <ol style="list-style-type: none">To critically analyze the social stigma misconceptions in society on epilepsy.To explain and demonstrate first aid to be given at the time of epileptic attack during and immediately after the attack.To understand and apply antecedent behaviour, consequence analysis in the management of epilepsy.To design simple tools for monitoring of epilepsy by the family.To understand various drugs prescribed for epilepsy and related problems.To understand and analyze, apply various safety measures for persons with epilepsy in school, work place, at home and in other environments.To understand and apply counseling for persons with epilepsy and their family.To design public awareness training using mass media.To create awareness on epilepsy.
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Unit 3- Other disabilities

6.3.1	Other disabilities <ul style="list-style-type: none">a. To explain the rehabilitation needs of cardio-pulmonary problems in the community.b. To critically analyze persons with HIV/AIDS in community.c. To assess and plan rehabilitation needs of chronic patients with cancer and other illness.
6.3.2	Autism To discuss issues related to autism. <ul style="list-style-type: none">a. To understand charts of persons with autism and assess rehabilitation needs.b. To plan intervention for persons with autism.c. To assess special education needs of children with autism and plan education interventions.
6.3.3	Learning disabilities To discuss issues related to learning disabilities. <ul style="list-style-type: none">a. To understand charts of persons with learning disabilities and assess rehabilitation needs.b. To plan intervention for persons with learning disabilities.c. To assess special education needs of children with learning disabilities and plan education interventions.

ANNEXURE 6 B
PRACTICAL OF BLOCK 6: MENTAL ILLNESS, EPILEPSY AND OTHER
DISABILITIES

Unit 1 Mental health and management

Sl. No	Assignments
1.	Visit a counseling centre and prepare a report on various activities conducted in the centre for mentally ill persons.
2.	Visit a CBR programme and document various programmes/activities planned to rehabilitate mentally ill persons.
3.	Prepare a report visiting an institution for mentally ill persons and prepare an analytical report on advantages and disadvantages on institution based rehabilitation and community health services.
4.	Prepare a community awareness programme on the needs of mentally ill persons using mass media such as music, puppet, drama dance, street plays etc
5.	Conduct counseling sessions for 2 families with a member with mental illness and prepare a complete rehabilitation plan for the inclusion into normal daily living activities.
6.	Visit a school and prepare a mental health programme at elementary/ high school level.

Unit 2 Epilepsy

1.	Visit a village community and prepare a report on social stigma and misconceptions about epilepsy.
2.	Prepare a report on antecedent behavior and consequence analysis in management of epilepsy.
3.	Prepare simple recording boxes for monitoring for epilepsy and use the same on the efficient monitoring of epilepsy.
4.	Prepare a public awareness programme to create awareness on epilepsy.
5.	Prepare 3 reports for children below 14 yrs and critically analyze how epilepsy affects child development and learning.

Unit 3 Other disabilities

1.	Prepare a case study on individual needs and rehabilitation plans for at least 1 person for the following: <ol style="list-style-type: none"> a. A person with cardiopulmonary problems. b. A person with HIV/AIDS. c. A person with cancer. d. A person with childhood diabetes. e. A person with autism. f. A person with attention deficit hyperactivity disorder. g. A person with learning difficulty. h. A person with minimal brain destruction.
2.	Visit the institutions rehabilitating for the above and prepare a report on their strategies and management.

BLOCK 7: TEACHING TECHNIQUES

Unit 1- Teaching and learning principles

7.1.1	To understand and apply basic educational principles.
7.1.2	To understand and analyze different teaching strategies, developing a lesson, determining learning needs.
7.1.3	To understand the underlying principles and techniques of motivation.

Unit 2-Curriculum development

7.2.1	To understand the basic principles in curriculum development.
7.2.2	To understand and apply the skills necessary for group teaching and individual teaching.
7.2.3	To understand the basic principles in planning, organizing and apply the same in planning workshops, seminars, conferences and symposiums.
7.2.4	To understand the basic principles in developing teaching and learning materials and apply the same in training programmes.
7.2.5	To design curriculum for training parents, teachers, health workers, anganwadi workers using workshop approach.
7.2.6	To design a programme to conduct awareness for policy makers using seminar approach.
7.2.7	To develop training materials such as teaching aids, learning aids, flip charts, posters, use of power point presentation, display charts etc

Unit 3-Designing and implementing training programmes

7.3.1	To design training programmes for teachers, health workers, rehabilitation workers, parents and siblings.
7.3.2	To design sensitization/orientation programmes to policy makers, community leaders, doctors, elected representatives and other partners in CBR
7.3.3	To understand and apply basic principles in conducting action research in CBR

ANNEXURE 7 B**PRACTICAL OF BLOCK 7: TEACHING TECHNIQUES****Unit 1**

A1	To visit a training school for teachers/ Rehabilitation workers and document the strategies that are used in the training program.
A2	Prepare an individual need assessment to train the following personnel in CBR - a) Anganwadi workers, b) School teachers, c) Health workers.

Unit 2

A3	Prepare a curriculum on the following areas: 1) Training program for Anganwadi workers on early identification, intervention-using Portage. 2) Training program for schoolteachers on Inclusive education. 3) Training program for primary health care personnel on medical rehabilitation needs and prevention of disabilities.
A4	Prepare a report on the group educational program and individual educational program by observing these skills in an institution.
A5	To plan a workshop for families with a member with disability on how to organize self-help aid group in the community.
A6	Plan a work shop for 4 adults with disability on how to organize micro-credit self help groups in the community.
A7	Plan a workshop for aged disabled persons on self-help mutual aid groups in the community.
A8	Plan a seminar for policy makers; Panchayat Raj elected members on CBR.
A9	Organize one essay/ debate competition for high school or college learner on the rights of Person with disabilities.

Unit 3

A10	Prepare teaching and training materials used in the training program through- Charts, flash cards, black boards, OHP, LCD, power point computers, chit games, icebreaking activities etc...
A11	Prepare a puppet show for learner including addressing the needs of siblings of learners with disabilities.
A12	Plan a action research on any one of the topic: 1) Policies and practices in inclusive education. 2) Implementation of quota/ reservation system in the employment of persons with disabilities. 3) The impact of media projecting on women on affecting the quality of life of women with disabilities. 4) Inclusive poverty reduction program and its efficiency on protecting the rights of persons with disability.

**BLOCK 8: MANAGEMENT PRINCIPLES
(MANAGEMENT PRINCIPLES, CBR SERVICE DELIVERY SYSTEM)**

Unit 1- Planning CBR by applying management principles and tools

8.1.1	To understand and apply the principles required for mapping the resources.
8.1.2	To understand the basic principles used in the documentation of developmental work.
8.1.3	To understand and apply a Participatory Rural Approach in planning CBR.
8.1.4	To understand and apply a Logical framework analysis in planning CBR.
8.1.5	To understand and apply a Strengths Weaknesses Opportunities and Threats (SWOT) analysis.
8.1.6	To understand and analyze planning budgets for CBR.
8.1.7	To understand the basic principles in financial management.
8.1.8	To critically analyze the resource mobilization, human resource, material resource and money resources for CBR.

Unit 2--CBR service delivery system

8.2.1	To understand and analyze basic principles in planning a service delivery system in CBR.
8.2.2	To summarize roles and responsibilities of personnel at different levels in the implementation of CBR.
8.2.3	To plan and analyze job descriptions for personnel at different levels.

Unit 3 - CBR technology

8.3.1	To understand and plan early identification and intervention in CBR.
8.3.2	To understand and plan pre-school education services in CBR.
8.3.3	To understand and plan educational services in CBR using different approaches.
8.3.4	To understand and plan ability training in CBR.
8.3.5	To understand and plan employment opportunities in CBR.
8.3.6	To understand and plan medical rehabilitation needs in CBR.
8.3.7	To understand and plan other support services such as sports, culture and other activities in CBR.
8.3.8	To understand OMAR and apply the software in monitoring CBR.
8.3.9	To understand and apply information technology in CBR.
8.3.10	To critically analyze different issues concerning sustainability of CBR by the community, self-help organizations, government bodies, district CBR societies and others.
8.3.11	To understand and develop a reporting system in CBR and documentation.
8.3.12	To understand and apply a participatory evaluation approach.
8.3.13	To design strategies such as child-to-child, joyful learning, circle time, wall journals and other approaches in CBR.

Unit 4 - Monitoring and evaluation

8.4.1	To understand and apply the principles required for monitoring CBR programmes using OMAR software.
8.4.2	To understand and apply participatory evaluation principles in CBR.

ANNEXURE 8 B**PRACTICAL OF BLOCK 8: MANAGEMENT PRINCIPLES
(MANAGEMENT PRINCIPLES, CBR SERVICE DELIVERY SYSTEM)**

Unit 1 Planning CBR by applying management principles and tools

Assignment	
1	Visit a CBR program and document the management of the CBR program including personnel hierarchies in management, reporting system, and monitoring procedures and budget.
2	Visit a village community and conduct a mapping activity and list out all the resources in the community.
3	Conduct a PRA exercise in the community.
4	Prepare a problem tree, object tree, development immediate, intermediate goals expected, outputs, and necessary inputs of a CBR program using LF Analysis.
5	Conduct a SWOT analysis in CBR program and document the same.

Unit 2--CBR service delivery system

Assignment	
1	Analyze the needs for an effective service delivery system to develop CBR.
2	Organize a meeting with a disabled adult, NGO, CBO organization of PWDs and analyze the need to establish dist CBR Societies to promote networking and scaling up of basic rehab services.

Unit 3 - CBR technology

Assignment	
1	Prepare a CBR Project clearly identifying the strategies to meet the following needs of persons with disabilities: <ol style="list-style-type: none"> a. Early identification and intervention b. Pre-school education c. Special education d. Integrated and inclusive education e. Self and group employment f. Inclusion in cultural, sport and other activities g. Developing disabled person organizations h. Developing district CBR societies i. Reporting formats at different levels j. Strategies for participatory evaluation. k. Strategies such as child-to-child, wall journal, all time, joyful learning etc...

Unit 4 Monitoring and evaluation

Sl. No	Assignment
1	Students will conduct needs assessment using OMAR, Needs Assessment Staircase tool and complete half yearly/quarterly/monthly/daily report formats to be submitted by different personnel in CBR such as CBR workers, multipurpose rehabilitation workers, Local CBR committees and block level committees.
2	To design and conduct one participatory evaluation in a CBR program.
3	To develop both qualitative and quantifiable indicators for monitoring.

BLOCK 9: SOCIAL WORK PRINCIPLES

(PROTECTING THE RIGHTS OF PERSONS WITH DISABILITIES, FAMILIES, AND MEMBERS WITH DISABILITY, ENHANCING THE SOCIAL RESPONSIBILITY OF THE COMMUNITY)

Unit 1-Human rights and CBR, understanding and analyzing how to safeguard the human rights of persons with disabilities and applying specific strategies to address the issues concerning women and aged persons with disabilities.

9.1.1	To understand and analyze various policies and legislative measures available for the protection of human rights of persons with disabilities at international, national and local levels.
9.1.2	To understand and analyze the human rights of persons with disabilities, women and aged persons, and prepare an analytical report on the various forms of violation and abuse of these rights in the society.
9.1.3	To critically analyze the concepts of community, family, and interdependent and independent living in different social, cultural and economic contexts.

Unit 2-Social work principles, understanding and applying social work principles in community based rehabilitation.

9.2.1	To understand and apply social work principles in safeguarding the human rights of persons with disabilities.
9.2.2	To understand, analyze and apply social work principles in community organization and mobilization.
9.2.3	To critically analyze the existing strategies such as self-help groups, and develop self-help groups of persons with disabilities, aged persons with disabilities, and families with a member with a disability.
9.2.4	To understand and analyze self-advocacy and group advocacy strategies and apply the same in community based rehabilitation.
9.2.5	To design and implement community awareness programmes using puppet, theatre, street theatre, music, drama, art, and dance, etc. in training programmes.
9.2.6	To critically analyze the community attitudes and social stigma towards disability in different socio-cultural contexts.
9.2.7	To understand and design leadership programmes for persons with disabilities.

ANNEXURE 9 B**PRACTICAL OF BLOCK 9: SOCIAL WORK PRINCIPLES**

Unit 1-Human rights and CBR, understanding and analyzing how to safeguard the human rights of persons with disabilities and applying specific strategies to address the issues concerning women and aged persons with disabilities.

SL. No.	Assignments
1	Visit a community and analyze the quality of life of persons with disabilities in comparison with the quality of life of the rest of community, reflecting the participation in developmental programmes, cultural activities, family activities, and employment, etc.

Unit 2-Social work principles, understanding and applying social work principles in community based rehabilitation.

SL. No.	Assignments
1	Organize a meeting of the community and discuss and report the perception of the community and persons with disabilities regarding the rights of persons with disabilities.
2	Visit self-help groups and critically analyze to what extent these organizations are protecting the rights of the disabled.
3	Prepare and implement a strategic plan using mass media, addressing the issues concerning the disabilities and social responsibility of the community.
4	Plan and design a leadership programme for persons with disabilities.

BLOCK 10: CBR FIELD POSTING

PROJECT

FIELD ASSESSMENT (Duration)

**Total Duration-310 hours
(approximately two and a half months)**

Suggested distribution of time to be planned by the student for the completion of the unit.

Duration 60 hours

Student is expected to spend 60 hrs in collecting information, conducting survey, collecting data, building rapport with organization and community and prepare a plan of action clearly identifying the goals, objectives, strategies, methodology, method of analysis of results. During this phase the student will also review the literature related to issue addressed by the student in CBR. The scope of field posting is not only to get the first hand experience of CBR and also suggest ways and means of strengthening CBR based on the learning and completing all the 9 modules.

Duration: 60 hours

In the second part of the field posting student is required to discuss the plans with the organization and finalize the project plan. It is important for the student to work on total partnership with organization to ensure the field posting benefits the organization in strengthening the CBR program during field posting. If there are no CBR program student can also work in Rural development program to initiate CBR program during field posting. The implementation as per planned objectives should be started in the second part of the field posting.

Duration: 130 hours

In the third part of the field posting the student should complete implementation and collect data to analyse the results.

Duration: 60 hours

In the last phase student will prepare the final dissertation discussion with the organization and submit to the University.

BLOCK 10: CBR FIELD POSTING

Objectives
This module will be a posting for 310 hours in a Community Based Rehabilitation project area where the participants will have direct contact with the disabled in his/her community.
The participants will learn by practically participating in the rehabilitation services rendered through the CBR project staff.
The participants will carry out various independent and group projects, thereby coming into more intimate contact with the community.
The knowledge, skills and attitudes acquired in all other modules will be practically tested in the community, in this module.
In collaboration with the community, the participant will collect data, conduct surveys, epidemiological and social investigations to prepare a community profile, perform social work and counseling sessions, design child-to-child programmes, demonstrate various communication methods, fabricate low cost but appropriate, affordable and acceptable aids, appliances and toys, conduct orientation courses training programmes, seminars and workshop for health workers, teachers, members and leaders of the community and parent groups.

Student will submit dissertation based on the fieldwork:

DISSERTATION FORMAT

- 1.Introduction
 - 2.Review of literature
 - 3.Objective of the study
 - 3.Methodology
 - 4.Results and analysis
 - 5.Discussion
 - 6.Conclusion
- Annexure-Formats, Tools, Photographs