

Good Practices from India

Submitted by: T D Dhariyal, Advisor Disability, CBM India Trust and Former State Commissioner for Persons with Disabilities, Government of NCT of Delhi and Deputy Chief Commissioner for Persons with Disabilities, Government of India

1. A number of DPOs, CSOs working for persons with disabilities and the individuals in India joined together and volunteered to compliment the measures taken by the Govt at the centre, states and at district level immediately after the Covid-19 Pandemic was declared. The effort was to ensure that persons with disabilities received the required assistance and were not left behind during the Covid-19 Pandemic. The CSOs like CBM India Trust along with its partners across the country, designed and planned Covid-19 response to provide immediate essential relief material especially food, medicine, shelter, online educational material to the persons in need in general and persons with disabilities in particular.
2. The WhatsApp Group of the Advisory Committee of the State Commissioner for Persons with Disabilities, Delhi expanded and jointly with the organisations working in the sector, formed another WhatsApp group comprising 112 members working for persons with disabilities as a new group with the following objectives:
 - i. Network to identify and reach out to persons with disabilities in need in Delhi and national Capital region.
 - ii. Contact the person find out his/ her requirement
 - iii. Arrange for delivery of cooked food through volunteers in collaboration with Government providers, individuals, NGOs and connect them to the nearest food supply area.
 - iv. Deliver through volunteers and employees of the CSOs in the group dry ration or cash to the persons with disabilities and their families.
 - v. Assist the persons with disabilities reach the nearest shelter arranged by the Govt.
 - vi. Coordinate with the Govt officials and the Police and assist in arranging movement passes to reach the hospital, blood transfusion centre or their homes.
 - vii. Assist in applying for pension and ex-gratia financial assistance announced by the Govt.
 - viii. Arrange for counselling, sign language interpretation to such persons with hearing impairment who got stuck midway when the lockdown was imposed.
 - ix. Coordinate with the officials/ Commissioners of the home state of the persons with disabilities wanting to join their families.
 - x. Share the online teaching material especially for children with autism, intellectual and other developmental disabilities.
3. As the current and the former State Commissioner for Persons with Disabilities, Delhi were also the members of the group, the Group was more effective in coordinating and soliciting cooperation and fast action by the Government agencies in and outside Delhi to provide quick relief to persons with disabilities. The group members individually and collectively were instrumental in having the circulars/ disability inclusive guidelines issued or propose to the key Ministries namely, Department of Empowerment of Persons with Disabilities, Ministry of Health, Ministry of Home affairs. Some of the examples are as under:

- i. Many organisations had prepared and disseminated Covid -19 Pandemic related information in sign language and other accessible formats.
- ii. Issue of disability inclusive guidelines on Covid-19 to all the state govts.
- iii. Issue of order to include persons with disabilities and their attendants among those allowed movement pass during lock down/curfew for essential requirements like treatment, therapies.
- iv. Issue of instructions to the police authorities to allow persons with thalassemia/ blood disorder to go for blood transfusion and to the blood donor to go to donate blood.
- v. Taken up with the Government to provide at least 25% higher amount of ex-gratia payment to persons with disabilities in light of the provision in the Rights of Persons with Disabilities Act, 2016.
- vi. Taken up with the Government to collect, compile and analyze the disaggregated data by disabilities with regard to the infection, treated, deaths, etc. and make the comparable data available.