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आजादी का
अमृत महोत्सव

वर्ष : 18

अंक : 4

RNI No. DELIN/2000/9036

सामाजिक न्याय संदेश

अक्टूबर-नवम्बर-दिसम्बर 2022

समता, समानता और समरसता का वाहक

ISSN No. 2455-6181

महर्षि अष्टावक्र



वामन देवता



सूरदास



दिव्यांगजन
विशेषांक - 2

अम्ल प्रभावित

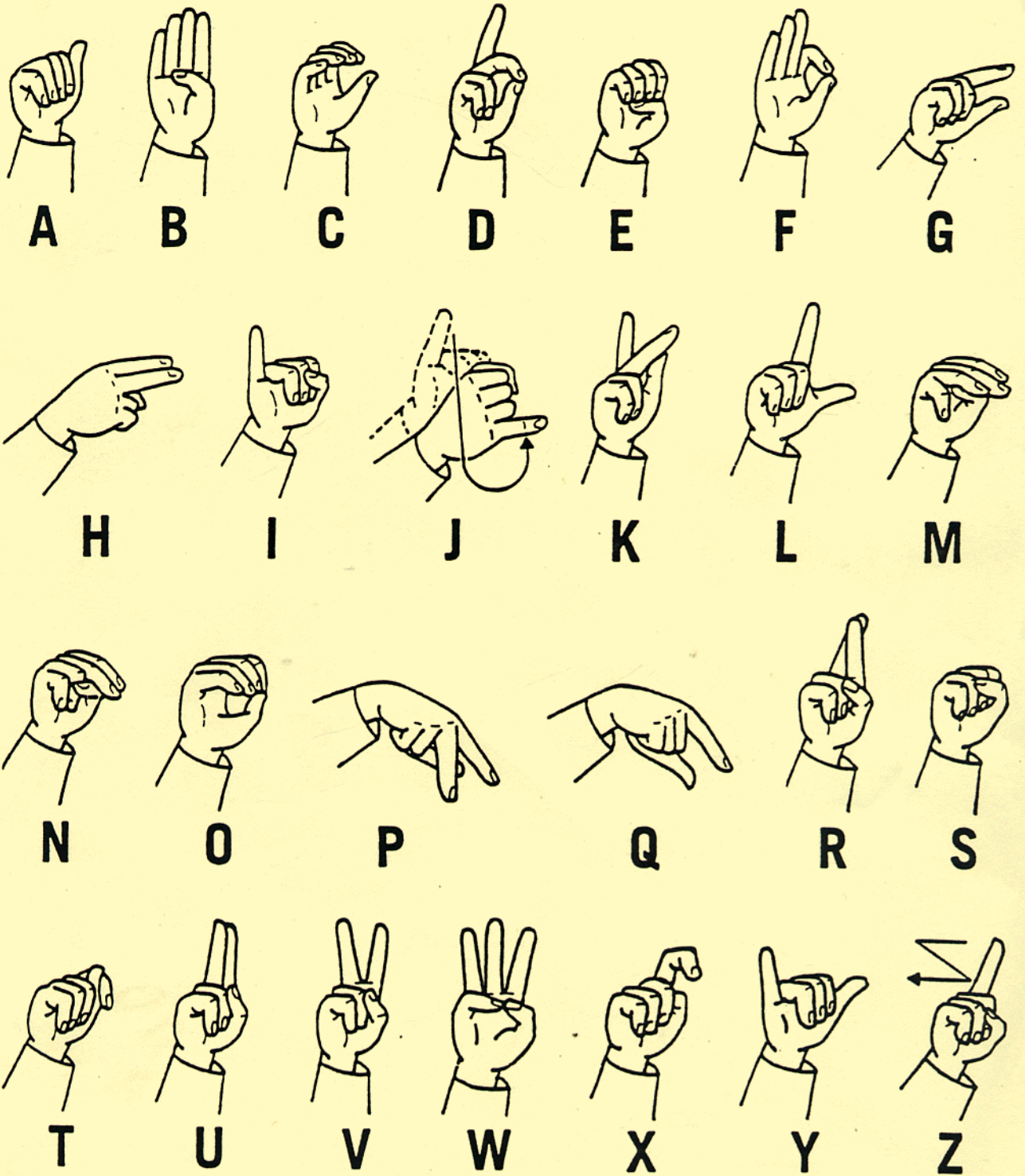


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डॉ० अम्बेडकर अंतर्राष्ट्रीय केंद्र,
(सामाजिक न्याय और अधिकारिता
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अस्वीकरण

“सामाजिक न्याय सन्देश” में
प्रकाशित सामग्री में शोध पत्र,
अभिमत, विचार, दृष्टि आदि
लेखकों के हैं। डीएआईसी अथवा
संपादक की सहमति अनिवार्य नहीं
है। समस्त कानूनी मामलों का
निपटारा केवल दिल्ली/नई दिल्ली
के क्षेत्र एवं न्यायालयों के अधीन
होगा।

सरंक्षक

श्री वीरेन्द्र कुमार

सामाजिक न्याय और अधिकारिता मंत्री

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निदेशक, डॉ० अम्बेडकर अंतर्राष्ट्रीय केंद्र

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पी० डी० एफ०, डॉ० अम्बेडकर अन्तर्राष्ट्रीय केंद्र

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संपादकीय

शारीरिक अक्षमता मनुष्य के प्रत्येक कार्यों में बाधा पहुँचाती है क्योंकि शरीर ही सभी साध्यों का साधन है। विदित है कि, सभी मनुष्यों में कुछ अंतर्निहित क्षमताएं होती हैं लेकिन उसके सम्पूर्ण विकास के लिए कुछ विशेष परिस्थितयां आवश्यक हैं। राज्य का प्राथमिक कर्तव्य है कि उस परिवेश का निर्माण करे, जिसमें प्रत्येक व्यक्ति अपने क्षमता के उच्चतम अवस्था को प्राप्त कर सके।

भारत सरकार इस दार्शनिक आधार को भली-भांति समझती है और इसलिये वर्तमान में केन्द्रीय सरकार की नीतियां समता, समानता व समरसता से प्रेरित है। यह अवधारणा, जन-सहभागिता, प्रतिनिधित्व और जन के सम्मान पर आधारित है जो राजनीतिक, सामाजिक, आर्थिक व जीवन के अन्य क्षेत्रों में भी परिलक्षित हो रही है। इसके प्रत्यक्ष उदाहरण, भारत सरकार द्वारा प्रदत्त पद्मश्री, पद्मभूषण, पद्मविभूषण और भारत रत्न के पुरस्कार हैं। वर्ष 2015 से अब तक मिले पुरस्कारों की सूची का भौगोलिक विस्तार और सामाजिक प्रतिनिधित्व जन के सम्मान को प्रदर्शित करता है। यही सोच दिव्यांगजनों से सम्बंधित नीतियों, योजनाओं और कार्यक्रमों में भी दिखती है।

सरकार यह मानती है कि एक समावेशी समाज के निर्माण के लिए दिव्यांगजन की सहभागिता आवश्यक है। वे समाज के अनिवार्य हिस्सा हैं। दिव्यांगजन की स्थिति विशेष होती है, इसलिए सरकार ने दिव्यांगता को पुर्नपरिभाषित किया है। दिव्यांगजन के लिए समानता, सम्मान और अवसर का निर्माण के लिए सरकार प्रतिबद्ध है। इसी उद्देश्य से "दिव्यांगजन अधिकार अधिनियम 2016" को पारित किया, जिसके परिणामस्वरूप वर्तमान परिदृश्य में दिव्यांगजनों की सामाजिक, आर्थिक व शैक्षणिक रूप से पुनर्वास के प्रयास को विस्तारित किया गया है। इस अधिनियम की सबसे बड़ी विशेषता यह है कि इसने दिव्यांगता की श्रेणी को विस्तृत किया है। पहले सात प्रकार की दिव्यांगता की श्रेणी होती थी, इसके स्थान पर 21 प्रकार की दिव्यांगता को शामिल किया गया है। इसमें अम्ल पीड़ित और बौनेपन को भी दिव्यांग श्रेणी में रखा गया है। सरकार ने अभी सांकेतिक भाषा के विकास और प्रसार को भी महत्वपूर्ण माना है। यह सरकार दिव्यांगजनों को सशक्त बनाकर समाज की मुख्यधारा से जोड़ने व जीवन को गौरवशाली बनाने के लिए तत्पर दिखती है, लेकिन दिव्यांगजन के विषय में कई मील और चलना शेष है ताकि एक सहभागी सामाजिक व्यवस्था का निर्माण हो सके।

दिव्यांगजन से सम्बंधित नीतियों, योजनाओं और कार्यक्रमों को ध्यान में रखते हुए 'सामाजिक न्याय संदेश' का यह विशेषांक प्रकाशित किया जा रहा। आशा है कि आप सभी इस विमर्श का सहभागी बनेंगे।

शिव पाठक



Disaggregating the Data to ‘Leave No One Behind’: An Analysis of Disability Data Paradox in India

Dr. Ambar Zahara

Abstract

Today lack of adequate data and particularly disability-disaggregated data in Indian government’s official data sources is making it difficult to track issues regarding the extent of inclusiveness of differently abled people in the human rights. Just as the Economic Survey 2018-19 for the first time highlighted about the significance of gender data disaggregation similarly, today we need urgently the disability data disaggregation. Though presently India has lots of inclusive flagship programmes and schemes such as Access India Campaign, Khelo India, Special Education, but when we peep into the Economic Surveys and Union Budgets it becomes difficult to find out the financing patterns as well as the percentage of disabled beneficiaries of these schemes/programmes. In some cases we also observe lack of harmonisation between the major legislations that talk about inclusiveness.

Under this background the present paper aims to examine how the issue of disability is addressed in the Economic Surveys from 2017-18 to 2020-21 and how well disability data is broken down under the Union Budget from 2017-18 to 2021-22 . The paper is organised into three sections. Section I elaborates about the disability under the Economic Surveys and the Union Budgets. Section II highlights upon international perspectives regarding the disability data disaggregation through WGSS Section III includes recommendations and conclusion.

Introduction:

“Disability” has been an issue of major concern since thousand years ago. Though the perspective has changed and “Vikalang” is replaced with “Divyang”. The need of the day is to examine whether changing the connotation is enough or some bold steps are yet to be taken. The understanding of disability is progressing rapidly. But the more we get familiar with this issue, the better we understand the barriers faced by the disabled person to equip with accessible world.

As per the United Nations 2030 Agenda for Sustainable Development Goals disability cannot be a reason or criteria for lack of access to development programming and the realization of human rights. To insure sustainable, inclusive and transformative future of the people with disability **as well as protecting their rights in the society to participate in the society in equality with other citizens** , what is urgently required is the availability of adequate, accurate and properly disaggregated data on disability.

Government of India has enacted various Acts for the welfare of the persons with disabilities such as; The Mental Health Act 1986, The Rehabilitation Council of India Act, 1992, Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act 1995 , Rights of Persons with Disabilities (RPWD) Act 2016. and the Mental Health Care Act 2017.

To fulfil the obligations to the United Convention on the Rights of Persons with

Disabilities (UNCRPD), to which India is a signatory, the government of India took a historical step by replacing the PwD Act 1995 with a more humanitarian (RPwD) Act, 2016 and the Mental Health Act 1986 with more dynamic the Mental Health Care Act 2017. Article 31 of the Committee of RPwD 2016 and United Nations 2030 Agenda, Goal 17 of Sustainable Development Goals (SDGs) also mandate disaggregation of all data based disability, which India has committed to implement.

Today, lack of adequate data and particularly disability-disaggregated data in Indian government's official data sources hinders policy makers to track issues regarding the extent of inclusiveness of differently abled people in the human rights leading to limited understanding of disability issues and poorly designed policies and programmes.

Just as the Economic Survey 2018-19 for the first time highlighted about the significance of 'gender data disaggregation' similarly today we need the 'disability data disaggregation'. Though presently India has lots of inclusive flagship programmes and schemes such as Access India Campaign, Khelo India, Inclusive Education schemes but it becomes difficult to find out the financing patterns as well as the percentage of disabled beneficiaries of these schemes/programmes due to the absence of data disaggregation as well as missing harmonisation between the major legislations that talk about inclusiveness. Under this background the present paper aims to examine how the issue of disability is addressed in the Economic Surveys from 2017-18 to 2020-21 and how well disability data is broken down under the Union Budget from 2017-18 to 2021-22.

The paper is organised into three sections. Section I elaborates about the disability statistics in India as revealed under the Economic Surveys and the Union Budget for the period 2017-18 to 2021-22. This period is taken deliberately to assess the impact of RPwD 2016 upon the government data sources. Section II of the paper

highlights upon some international perspectives regarding the disability data disaggregation through Washington Group Set of Questions (WGSS). Section III includes recommendations and conclusion.

Section I

Disability Statistics in India:

Disability Statistics in India are captured mainly through decennial Population Censuses and periodic dedicated National Household Surveys (NHS). The Census 2011 shows marginal increase in the number of people with disabilities in comparison to the Census 2001. It rose from 21.9 million to 26.8 million over the period of 10 years. As per the Census 2011 gender wise percentage of disabled male (14.9 million) is more than female (11.9 million). Further the rural areas occupy 18.0 million of the people with disabilities whereas the urban areas only 8.1 million are disabled. (MOSPI, 2012)

If we examine the Census, we observe availability of data on disability lacks consistency as though disability had been a subject of concern under the 1872 census of India, the issue was not taken into the censuses after 1941 for 50 years till 1980 due to some or other reasons among them the one major cause was 'social stigma'. Further lack of data as well as the variation in the data of census and National Health Surveys (NHSOs) has made the issue more complicated (MOSPI2021).

Keeping these shortcomings in the Censuses and NHS into mind, this paper aims to examine how the two major government annual data sources Economic Survey and Union Budget address the issue of disability.

Disability Data in Economic Survey of India

Economic survey is a document issued by Ministry of Finance, Government of India. It depicts all the economic performance of India over the past 12 months. It provides the data and economic analysis in such a comprehensive way



that the citizens of the country can understand the state of economy easily. It basically lays down the background for the presentation of the budget. This document put forth the problems and prospects of Indian economy against which budgetary data are furnished. The document is presented in two volumes. Volume I provides economic analysis of economic growth and development. Volume II prescribes the economic performance of major socio-economic sectors during previous financial year. (Trivedi, J. 2021).

The present study is limited to Chapter 10 , Vol. II of the survey that focuses upon social infrastructure (education, health), employment and human development labour market and other basic facilities provided to the citizens of the nation in more inclusive way.

The following table shows how inclusive has been the subject of disability in the economic analysis of annual economic surveys after the implementation of RPwD Act 2016.

Table 1: Disability Statistics in Economic Surveys

Economic Survey 2017-18	<ul style="list-style-type: none"> • “The concept of Disability Adjusted Life Years (DALYs)¹ provides a framework for analysing the disease burden and risk factors. DALYs is the sum of years of potential life lost due to premature mortality and the years of productive life lost due to disability” p.178
Economic Survey 2018-19	<ul style="list-style-type: none"> • Pradhan Mantri Suraksha Bima Yojana, 2015 Accident insurance scheme, offers a one-year accidental death and disability cover. Annual premium is Rs. 12. Available to people in the age group 18 to 70 years as on 31/10/2018, gross enrolment is 14.27 crore. Amount of claims raised: `449.82 crore
Economic Survey 2019-20	<ul style="list-style-type: none"> • As per U-DISE, 2017-18 (provisional), 38.62 per cent of government elementary schools have ramps.
Economic Survey 2020-21	<ul style="list-style-type: none"> • As per U-DISE+ (2018-19) , the physical infrastructure of more than 9.72 lakh government elementary schools has improved significantly. Out of these 74.2 pe cent government schools have ramp facilities. (p329) • Under the programmes and Schemes for School Education during 2020-21, allocation for CWSN increased from Rs. 3000 to Rs. 3500 per child per annum. Stipend of Rs. 200 per month for Girls with Special Needs from Classes 1 to 12. (Box 1,pg 332) • Provision of one DTH channel specifically for hearing impaired students in sign language. For visually and hearing-impaired students, study material has been developed in Digitally Accessible Information System (DAISY) and in sign language; both are available on NIOS website/ YouTube. 25 NCERT textbooks have also been converted into DAISY format. (Box 3.d. pg. 335)

Sources :Compiled from economic surveys from 2017-18 to 2021-22

- The Economic Survey 2017-18 highlighted upon the importance of DALYs Model , used in the report ‘India: Health of the Nation’s States’, 2017” .But the survey does

not through light, how the report defines “disability” and what are the dimensions applied.

- Under The Economic Survey 2018-19 there is no inclusion of people with disabilities while talking about various social protection schemes and achievements during 2014-2019, except for Pradhan Mantri Suraksha Bima Yojana, though under all the schemes disabled persons are target group.
- On comparing the DISE Data reported in the Economic Surveys of 2019-20 and 2020-21 we observed that the percentage of provision of ramps in government schools increased from 38.62 percent to 74.2 percent. The data of Economic Survey of 2019-20 doesn't match with the UDISE data, as per the Flash Statistics 2017-18, 64.08 primary schools and 62.66 Upper Primary Schools had ramp facilities (UDISE, 2017-18). It reflects lack of seriousness regarding the issue of disability.
- The Economic Survey 2020-21 talks about provision of one DTH channel specifically for hearing impaired students in sign language and so one but it is not clear whether the beneficiaries are aware about such programmes or not as more than 90 percent of the people with disabilities live in rural areas who fight for their daily bread and butter.

Union Budget and the Disability Sector:

The budget plays a crucial role in the revival of the economy, as it highlights the policy dimensions as well as the priorities of the government. It is basically statement of governments policy that elaborates revenue sources and expenditure to be borne by the Centre. On the one hand it provides direction to the industries to actively participate in the growth journey, on the other hand it helps citizen to make a balance between disposable income and real purchasing power.

Socio economic inequality is a curse the society. Government announces various policies for the welfare of the the underprivileged sections of the society through annual budget. The Department of Empowerments of Persons with Disabilities under the Ministry of Social Justice & Empowerment, Government of India (MoSJE), being the nodal agency, aims to empower the persons with disabilities through its programmes and policies. Since disability is a multisectoral issue, this department faces lots of hurdles in implanting its policies and programmes successfully due to lack of inter-ministerial coordination.

The following section elaborates how the disability sector is captured in the financial statement of the concerned ministries from the union budget 2017-18 to the union budget 2021-22 and the progress made to ensure equal rights for all leaving no one behind.

Ministry of Social Justice and Empowerment:

The budgetary allocation of the Department for Empowerment of Persons with Disabilities is divided into four major head. This includes Central Sector Schemes/Projects, Autonomous Bodies, Public Sector Undertakings and Centrally Sponsored Schemes (SIDPA). The following table portrays the trend in allocation for the major programmes. The Demand for Grants, 2017-18 for this department shows a marginal increase of around 30 per cent; the budget has increased from Rs. 900 crore in 2020-21 (RE) to Rs. 1171.77 crore in 2021-22(BE). But if we compare the Union Budget 2020-21 (RE) with Union Budget 2020-21 (BE) we observe a declining trend as shown in the table the total expenditure declined from Rs. 1325.39 crore to Rs. 900 crore. The budget for central sector schemes under the department has also shows a negative picture.



Table 2: Details of Allocation by The Department of Empowerment of Persons with Disabilities (Rs. Crore)

Particulars	2017-18 (A)	2018-19(A)	2019-20 (A)	2020-21 (BE)	2020-21 (RE)	2021-22 (BE)
Central Sector Schemes/ Projects	364.88	437.65	655.43	780.00	536.89	709.77
Autonomous bodies	232.71	266.83	274.78	465.52	285.75	377.93
Public Sector Undertakings	37.74	30.33	60.92	50.01	50	50.01
(Centrally Sponsored Schemes) Schemes for the Implementation of persons with disabilities Act	272.23	260.84	-	-	-	-
Secretariat	20.76	21.93	25.05	29.86	27.36	34.06
Actual Recoveries	-5.85	-8.45	-3.85			
Total	922.47	1009.13	1012.33	1325.39	900	1171.77

Sources :Compiled from Union Budget from 2017-18 to 2021-22

Schemes for Persons with Disability Act (SIDPA) Central Sector Scheme or Centrally Sponsored Scheme: Both central sector schemes and centrally sponsored schemes are welfare schemes, the only difference between them is that central sector schemes are fully funded by the union government whereas centrally sponsored schemes are jointly funded by the centre and the state. Table 2 portrays a contradictory scenario, up to 2018-19, the fund allocated for **Schemes for Persons with Disability Act (SIDPA)** was separately mentioned under the Centrally Sponsored Schemes Head, while from 2020-21 onwards it is subsumed under the Central Sector Schemes head of the Demand Note for Grants . As per the policy document of MOSJE, SIPDA came into effect in 1999 as Central Sector Scheme with an objective to provide financial assistance to the activities provided under PwD Act 1995 and when the RPwD 2016 replaced, PwD Act 1995, SIPDA was revised accordingly. (MOSJE, 2018)

Now the question arises if it is a central sector scheme why its allocation where put under the centrally sponsored schemes head of the Demand Notes of Department for Empowerment of Social Justice of persons with disabilities until 2018-19 and if there are some modification why they are not referred in policy documents.

SIPDA includes lots of activities along with some recently added components like Skill Development Component and Access India Program with decreasing actual expenditure.

The Scheme for Implementation of the Persons with Disabilities Act (SIPDA) has witnessed increase only in the budget estimates and revised estimates. The Actual expenditure from financial year 2017-18 to 2019-20 shows a decreasing trend. (See. Fig 1)

Ministry of Education :

Samagra Siksha Abhiyan is a merger of three schemes, Sarva Shiksha Abhiyan (SSA), Rashtriya Madhyamik Shiksha Abhiyan (RMSA) and Strengthening of Teacher Training Institutions under the Department of School Education and Literacy. SSA and RMSA include persons with disabilities as a component for inclusive education . But disaggregated financial data on the allocation to these programmes are not available in public domain (CBGA 2021).

Lack of harmonisation between the major legislations RPwD Act 2016 and RTE Act 2009 that talk about inclusiveness is very much visible. For example, even though the RPwD Act 2016 makes inclusive education a statutory guarantee, the Right of Children to Free and

Compulsory Education Act, 2009 (RTE Act) does not even define inclusive education. (RPwD, 2016, RTE, 2009)

Ministry of Health and Family Welfare:

The analysis of the health budget presents a decreasing trend in allocation for Persons with

Disabilities for national programmes regarding mental health as well as for control of blindness. It is also observed that the specific health requirements for persons with thalassemia being incorporated in RPwD 2016 find no mention in the budget document.

Table 3: Details of Allocation by the Ministry of Health and Family Welfare (Rs. Crore)

Particulars	2017-18 (A)	2018-19 (A)	2019-20 (A)	2020-21 (BE)	2020-21 (RE)	2021-22 (BE)
National Mental Health Programme	43.58	2.01	2.51	40	27.36	40
National Institute of Mental Health and Neuro Sciences, Bengaluru	379.4	411.83	453.41	434.43	474.43	500.44
Lokpriya Gopinath Bordoloi Regional Institute of Mental Health, Tezpur	47.82	49.97	55	53.2	46	57
National Programme for Control of Blindness	24.52	2.82	1.82	20	5	10.5

Sources : Compiled from Union Budget from 2017-18 to 2021-22

Due to heavy burden of mental illness in the community accompanied with inadequate mental health care infrastructure , the Government of India launched National Mental Health Programme (NMHP) in 1982 and consequently in 1996, District Mental Health Programme was added, in 2003 two more schemes were incorporated and in 2009, the Manpower Scheme further strategized the programme (MHFW, 2020). Recently the Mental Act 2017 replaced the Mental Act 1986 and came into effect from 2018. According to a study by Journal of Psychiatry annual the estimated cost to implement this Act would be Rs.94,073 crore (Munjal, 2020). But the following table demonstrates a dismal picture where the actual expenditure on NMHP shows a great fall down from Rs. 43.58 Crore in 2017-18 to Rs .2.01 Crore in 2018-19 and 2.00 in 2019-20. Though the budget estimates for 2020-21 and 2021-22 project increase in the fund allocated for this programme but a cursory review of the previous

years' budgets reveal a huge differences among estimated budget (BE), revised budgets (RE) and the Actual Budget (A).

With a vision to reduce the prevalence of blindness by 0.3 per cent in the year 1976, Government of India started a centrally sponsored scheme, 'National Programme for Control of Blindness and Visual Impairment' (MHFW, 2020). But the situation is still worrisome. As per the latest data by World Health Organisation nearly 40 million people in India including 1.6 million children. Still suffer from blindness or visually impaired and majority of them belong to the rural areas. (Garewal, 2021). Table 2 depicts huge gap in actual funding and the fund allocated for National Programme for Control of Blindness also.

The graph portrays the gap in the budget allocation and the actual spending on both of the national programmes. It reflects urgent need towards change in attitude towards mental

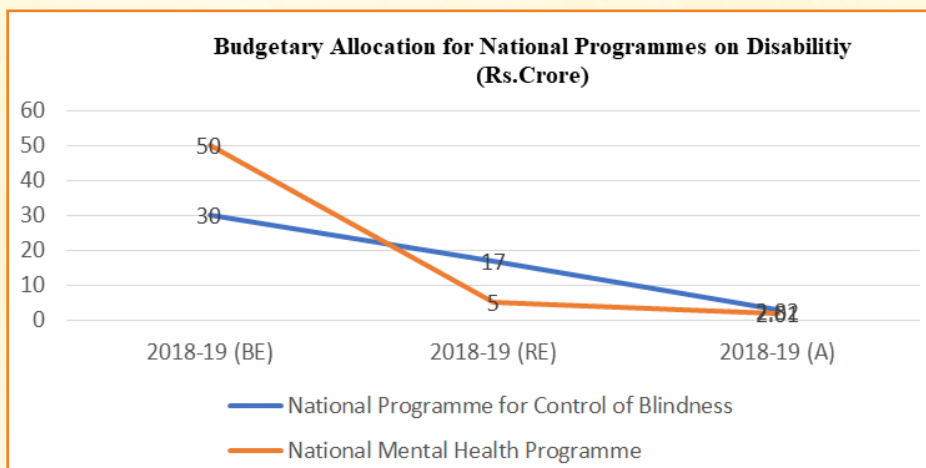


Figure 2: Gaps between the Actuals and the Estimates

Source: Compiled from Union Budget 2018-19 & 2019-20

health and vision impairment, huge investment push and awareness programmes specially in the rural areas.

Ministry of Rural Development:

Persons with Disabilities are treated as target groups under various social security programmes of Ministry of Rural Development such as *Pradhan*

Mantri Awas Yojana, Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA) and National Social Assistance Programme (NSAP). However the financial allocation of only Indra Gandhi National Disability Pension Scheme (IGNDPS), which is a part of NSAP is visible in the notes on the demand for grant, no data is available for the benefits availed by the disabled persons in other schemes.

Table 4: Details of Allocation by the Ministry of Rural Development (Rs. Crore)

Particulars	2017-18 (A)	2018-19 (A)	2019-20 (A)	2020-21 BE)	2020-21 (RE)	2021-22 (BE)
Indra Gandhi National Disability Pension Scheme (IGNDPS)	221.36	280.21	234.49	297.37	346.54	297.37

Table 4 depicts a fluctuation in the allocation that ranges between a small increase as well as decrease of Rs. 50 to 60 crore. It is not in adherence with the recommendations of the CRPD Committee regarding compensation of additional cost of disability and ensuring adequate standard of living.

Ministry of Youth Affairs and Sports:

Until the Union Budget 2018 'Promotion of Sports among Disabled' was a component

under the head 'Encouragement and Awards to Sportspersons' and Khelo India was part of another head 'National programme for development of Sports' showing a decreasing allocation (from 3.68 crore in Union Budget 2016-17 (A) to Rs 0.01.00 Crore in Union Budget 2018-19(BE)), (CBGA, 2019). but it is noted that from 2018-19 onwards the 'Promotion of Sports among Disabled' was integrated with Khelo India and the financial data for this component found no place in the union budgets.

Section II

International Perspective on effectiveness of Disability Inclusion Through Washington Group Short Set of Questions on Disability (WGSS):

In May 2001, World Health Organisation (WHO) developed a framework to conceptualise and measure disability known as International Classification of Functioning, Disability and Health (ICF). This framework laid down three types of functioning and also elaborated how these functioning are influenced by environmental and personal factors. This framework failed to develop a measurement instrument to identify a person as disabled. This gap was filled by Washington Group Short Set of Questions on Disability (WGSS), designed by Washington Group of Disability in 2002. It particularly focuses upon the ways to identify the persons who are at greater risk. The WGSS is designed to be used in censuses and sample based surveys. Today it is used as a preferred method to use with SDGs to count the number of people with disabilities world-wide. It is cost effective, easy to apply and generate more disaggregated and reliable data (ODI, Ministry of Social Development, New Zealand, 2017) .

The WGSS comprises of six questions focusing on six functional domains; seeing, hearing, walking, cognition, self-care and communication. (See Figure.3)

The methods allows to use different thresholds to derive disability status from the six set of questions.

Inclusion of WGSS Some Examples:

- In New Zealand for the first time used WGSS in the General Social Survey (GSS) for the 2016/17 collection year and it was further tested in 2018 for inclusion in census and the experts opined that WGSS would potentially provide valuable for the measurement of the indicators for each of the Strategy's outcome domains (*ibid*)

1. Do you have difficulty seeing, even if wearing glasses?
2. Do you have difficulty hearing, even if using a hearing aid?
3. Do you have difficulty walking or climbing steps?
4. Do you have difficulty remembering or concentrating?
5. Do you have difficulty (with self-care such as) washing all over or dressing?
6. Using your usual (customary) language, do you have difficulty communicating, for example understanding or being understood?

Response scales

- a. No - no difficulty
- b. Yes – some difficulty
- c. Yes – a lot of difficulty
- d. Cannot do at all

Figure 3: Washington Group Short Set of Questions on Disability

- To assess the prevalence of disability and its association with education and employment the International Centre for Evidence in Disability (ICED), a research group at the London School of Hygiene & Tropical Medicine used the Washington Group (WG) tools in representative samples from Nepal, Cameroon, Guatemala and India and concluded that using the WG tools and collecting data in a systematic way helps to monitor the level of inclusion of persons with disabilities across countries and over time.(Isley and Morgan, 2019)
- Disability and poverty are highly correlated. To reduce the burden of poverty first we need to find out the extent of the prevention of disabilities among the poor, it required proper data disaggregation. *Bolsa Familia*, a conditional cash transfer programme in Brazil succeeded in reducing extreme poverty among 24 million families



due to the quality of disaggregated data on beneficiaries(Gazola, 2015).

Disability is such an issue that cut across many sectors, it need valid and disaggregated data In India also the government can utilize WGSS during data collection for Census and Household Surveys. This method relies upon self-reporting and does not require any clinical assessment. Data collector can administer it easily. WGSS is also helpful for different ministries to understand how the target group they serve relate to each other and draft the policies accordingly.

Section III

Recommendations and Ways Forward:

National level statistics mostly represent aggregate improvement in the socio-economic sectors. They capture national averages and most of the time mask disparities at state, district, community and household level. Proper implementation of SDGs require the data set that is adequately disaggregated by income, gender, geography, age and disability.

Till now India has two major data sources on disability; population census and National Household Surveys (NSS) . Both of them seem to unable capture the true picture due to the lack of regularity. Keeping this into mind, the present paper attempted to examine the issue reviewing the government financial documents; Economic Surveys and Union Budgets that are published annually.

The overall analysis of both the documents reveals that as more and more schemes are subsumed under the flagship schemes, disaggregation of data gets squeezed. It further hampers proper monitoring, accountability, transparency and effective planning. As per article 13 of CRPD and Goal 17 of SDG data disaggregation is mandatory for all the signatories and India is one among them, it becomes necessary to disaggregate financial data on persons with disabilities across sectors

under a minor head. Key recommendations are as follows:

- Government needs to provide evidence based data on disabled people as it would facilitate the policy-makers to easily address the gaps between the actual and the proposed schemes and amend the existing policies and regulations according to ensure disability inclusion and mainstreaming.
- Similar to Gender Budget Statements there should be disabilities budget statement, elaborating how each ministry has allocated the budget for the disabled people under the schemes were they are target groups.
- Awareness campaign in rural areas and massive use of information technology can bring the disability reform in India.
- Data system needs to be more robust, valid and reliable to ensure proper evaluation and monitoring of the flagship programmes implemented by the government.
- In line with international standard , government should use the WGSS model in the surveys to mainstream the 'left behind'.
- Government should come with Annual survey on Persons with Disabilities to achieve the goals set under the SDGs.
- There should be consistency among the government data source regarding definition of disability, time set, type of population and so on.
- In the Economic Surveys reviewed in this paper data is disaggregated on the basis of gender, demographic region, and social group (SC and ST), it needs to be further disaggregated as disabled under each group only then we can proceed with more inclusive policies.
- The Economic Surveys show continuous increase in Social Expenditure but the analysis of budget portrays gloomy picture of the disability sector. Survey should explain the status of persons with disabilities in each

sector; education, health, employment, skill development and access of basic services like water, sanitation and housing.

- Disability Index should be developed as it would help to establish priorities for disability prevention and treat disability as major public health issue.
- Government should organise training programmes regarding valid and reliable data collection.

To conclude it can be observed that the union budgets and the economic surveys both while including the inclusion of all in every sector seem to exclude the information and data on the target 'disability group'. Further, financial commitment to implement RPwD Act 2016 is rarely visible across departments and ministries. It is important to understand that inter-ministerial as well as cross sectoral recognition of disability issues would help to utilize the available resource by modifying the policies and programmes in line with the UN Agenda 2030.

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Divyangjan with Special Reference to National Education Policy 2020

Dr. Santosh Kumar

Abstract

In the year 2020, India introduced a National Education Policy. While it is fair to question why the government things will make to implement this policy during a raging pandemic when discussions with various stakeholders was difficult, we must examine how it will affect disabled students' education. It's important to remember that India's first education policy were adopted in 1968. In 1986, the other one was adopted. There's no mention of ability in this.

Many in the sector were ecstatic when India enacted a National Education Policy in 2020 that recognized and incorporated disability. Many disability activists and academics praised the inclusion of the Rights of Persons with Disabilities Act in this policy.

However, privatization is at the root of the National Education Policy adopted in 2020. Disabled individuals are not a separate society and rather a part of the overall population of this country. As a consequence, every bill passed or policy implemented must have an influence on them. We can't even read disability in the framework of NEP 2020 in a vacuum; we need to know the socio-political context and read between the lines to grasp the nuances. It's important to recall that India's first education policy was adopted in 1968. In 1986, the third one was adopted. There has been no mention of disability in this. Many in the sector are delighted when India adopted a National Education Policy in 2020 which recognized and included disability. Many disability activists and

academicians welcomed the incorporation of the Rights of Persons with Disabilities Act in this policy.

Introduction:

Education is the most powerful means of rehabilitation for the disabled. Planned development in the field of education started after the establishment of Planning Commission in 1951, constitutionally, education has been considered a fundamental right under Article 21-A. In the same Article-26 of the Disabled Act 1995, there is a provision to provide free education and compulsory education to the disabled children till the age of 18 years. Even today, a large section of the handicapped is illiterate, as a result of which it seems possible to be included in the mainstream of the society.

Educational rehabilitation:

Under the Integrated Education for Children with Disabilities Act, the government has introduced continuous learning tools, dynamic support and ancillary services, etc., as well as the system of free education for children with disabilities between the ages of 15 and 18 years, under the Integrated Education for Children with Disabilities Act. Education is being provided through education, alternative schools, special schools, community based rehabilitation and vocational education.

The government provides free education, uniform, scholarship and other educational means to the disabled through proper means,



educational rehabilitation for the disabled; various educational institutions for higher education, vocational education, and higher education business centers are also being established in the state and other states.

National Education Policy - 2020:

On 29th July 2020, on Wednesday, the government approved the National Education Policy 2020. In the National Education Policy, the format of 10 + 2 has been completely abolished, the curriculum under school education in our country runs according to 10 + 2. But now it will be according to 5+3+3+4 that means one part from primary to second class then second part from third to fifth, third part from sixth to eighth but last part from ninth to twelve.

1. First 03 years children will take pre-school education from Anganwadi.
2. After this 02 years will study in class one and class two.

A new curriculum will be prepared for these 5 years of studies, in other words we can say that it will be activity based teaching work, after that there will be children from 03 to 08 years, thus the first 5 years phase will be completed.

Pre Primary Stage:-

There studies from class three to five, during which children will be taught science, art, culture and entertainment through various experiments. Under this, children from 11 years to 8 years will be taken.

Middle Stage:-

Study from class 06 to 08. Children from year 11 to 14 will be taken for study, subject based curriculum will be ensured in their classes as well as skill development course will also be started from class 06 itself.

Secondary Stage:-

Study from class 09 to 12 in two phases in which in addition to subject wise study, in-depth study

of that subject will be done. There will also be freedom to choose subjects. Earlier, this system used to get freedom to choose subjects only after class 10th lesson.

Major changes under school education under the National Education Policy of the year 2020:-

Vocational education giving professional knowledge has been started from class VI. This education policy has been finalized, now children can get professional and skill education from class 06 it. Internship will also be conducted at local level. Vocational education and Will be added on skill development, as a result of which the National Education Policy will not be unemployed; children will be given the necessary professional education of jobs in the school itself.

10th and 12th board examination will be easy, under this major changes will be made and the importance of board examinations will be reduced. The main emphasis in board exams will be on testing of knowledge so that the tendency of students to rot away, students are always under pressure regarding board exams and depend on coaching in order to get more marks but in future they will get freedom.

In the coming National Education Policy, various boards will prepare the practical model of board examinations in the coming time, such as annual semester and modeler board examinations. Under this policy, examinations will also be held in 05th, 08th, while 10th and 12th board examinations continue in a changed form. Will be done Performance will be assessed and it will be assessed at three levels.

First student himself Another classmate and Third teacher

A National Assessment Center Park will be set up which will test the learning ability of children from time to time. Special emphasis will be given to re-admission about 2 core children who have dropped out of school through 100% enrollment.

In the National Education Policy, special emphasis has been laid on the use of technology in education; it includes other schemes like online education, preparation of content in regional languages, virtual labs, digital library, apart from this, skill development courses will also be started from class 06 onwards. Selection the students of 9th to 12th will be able to choose freely under the National Education Policy 2020, the course material will be reduced in every subject. Under the National Education Policy 2020, special attention has been given to the following things:-

Under the Education Policy-2020, critical thinking, holistic inquiry, search based, discussion based and analysis based will be made.

1. Kendriya Vidyalayas will also have a pre-school section.
2. Practical knowledge will be promoted at every level.
3. Free boarding facility will be available for students from socio-economically disadvantaged background in Jawaharlal Navodaya Vidyalaya.
4. There will be more focus on Idea, Application and Problem solving in the course content and Teaching Learning will now be done in an interactive manner.
5. Nutrition and health card will be made for all the students of the school as well as there will be regular health checkup of the students.
6. Priority will be given to impart basic literacy and organ knowledge to children up to class 03.
7. Skill development will be started from class 06 itself. They will get entrance FBD from local level Will be done.

NCERT Early Childhood Care and Education for Children Up to the Age of 08 Years

N.C.P.F.E.CCE ECCE will develop a national curriculum and educational framework for

early childhood care and education through a comprehensive and robust institution system. Under which Anganwadi and Pre-school will also be included. In the policy, special emphasis has been given to keep the mother tongue, local language, regional language as the medium of instruction at least till grade 05 or beyond.

Students will be given an opportunity to choose Sanskrit as an optional subject in higher education at all levels of school. This option will be included in the three-language formula. Apart from this, no language will be forced on any student. Other traditional languages and literature of India will always be available as an alternative. Students will also have to participate in an enjoyable project activity on the languages of India any time during 06-08 under the Ek Bharat Shrestha initiative. Korean, Thai, French, German, Spanish, Portuguese, Russian languages will be introduced at the secondary level. OBC, SC/ ST National Scholarship Postal Code will be increased for the students, there will be a change in the report card of the children, and their report card will be of three levels.

From the above National Education Policy 2020, it seems that all the areas of study have been covered, so we can say that under the above education policy, special attention has been given to the area of rehabilitation and employment studies, which will come to the fore.

Economic Rehabilitation: Under the economic rehabilitation of persons with disabilities, daily employment and self-employment are also included in organized sectors, services should be increased according to the time and rehabilitation centers and vocational training centers should be developed in the country because rural and urban disabled can be productively empowered.

Persons with Disabilities Act, 1995 Reservation of 03 percent in government departments, public sector undertakings for employment in government, in various ministry departments, this group is A-3.07 percent, B-4.41 percent, C-3.46 percent and D-3.18 percent



public In sector undertakings, this position is being done at 02.78 percent, 08.54 percent, 05.04 percent, 06.75 percent.

Persons with disabilities in the private sector will be made competent after training according to their capacity. Vocational training will also be given as well as incentives to the disabled persons after employment in the service sector, incentives, tax exemptions, etc. will be promoted to generate employment for the disabled in private sectors.

In view of the slow rate of development of self-employment opportunities, self-employment is being promoted. Their all round development will be done through vocational education and management training. This trophy has become a transparent and efficient response to the existing systems of easy access to credit from the government through tax exemptions, duty exemptions, incentives etc. Priority will be given to government employment, encourage self-employment and financial assistance through self-help groups.

Elimination of disability is not being done as much as should have been done in the field of technology, so it is clear that there is neglect and lack of priority, although technically there has been a lot of development in the whole world regarding rehabilitation, but developing countries like India Still the matter of technical development regarding disability is very loose, so we can say that all the IITs of the country. And there is a provision for research on rehabilitation technology in major engineering colleges. But till now the Disability Council is not even aware of the development of any unique technology, if the system of rehabilitation of persons with disabilities becomes very appropriate, then the situation can improve day by day, but in spite of this, the eradication of disability in India And so far there is no clear and effective policy for rehabilitation of persons with disabilities.

After discussion with the subject experts, the reason for this neglectful attitude towards the disabled is the lack of representation of

persons with disabilities in the implementing bodies.

Rehabilitation program

Under the rehabilitation program, medical, educational, social rehabilitation programs will be developed in collaboration with medical and rehabilitation workers, disabled and family members, legal guardians and communities. -959(Miscellaneous)/2005 dated 31st May 2011 operated by 17 Schemes.

1. Application for loan by handicapped person.
2. Application for marriage incentive award of disabled person.
3. It has been decided to provide services related to application for assistance for artificial limb device of a disabled person to eligible persons with disabilities through electronics delivery system.

The following measures should be taken under the rehabilitation program by the Central Government and the State Government in other ways as well:-

1. State-level centers will be set up to provide joint rehabilitation services including human resource development, research and long term specialized rehabilitation.
2. Community based rehabilitation programs will be promoted. Rehabilitation and other related programs will be beneficial for the differently-baled and their families, self-help groups will be involved in the process of rehabilitation with a view to taking care of them.
3. With the help of Non-Governmental Organizations (NGOs), Panchayati Raj Institutions at the district level will be encouraged to establish health service planets for the severely mentally handicapped.
4. Residential rehabilitation centers will also

be set up for the training of vocational and social abilities of persons suffering from mental disabilities, in their place, any such mentally handicapped, who do not get any kind of social and financial assistance, they will be given the help of the government.

Human Resource Development:

Human resources should be trained to meet the needs of the differently abled in inclusive education, special education, home based education, pre-school education etc. Thereafter, various specializations (subject experts) and similar training programs would be developed. In this context the following programs can be implemented:-

- Training module for teachers for inclusive education:
- Diploma degree in special education and some other methods:
- Training for providing home based education and care services to differently-abled/senior citizens etc.

The Rehabilitation Council of India will play the role of a nodal agency¹⁸ in planning for the training of persons with disabilities. The role of national institutions in the training program for disability will be clearly determined, for which a five-year action plan will be developed over time.

Employment:

The following measures can be taken from the point of view of employment for the disabled:-

With the efforts of the government, try to provide new employment to Divyangjan in private sector organizations also.

Government incentives, training and cheap to generate cottage-industry based income for the handicapped

Government loan should be given at the rates.

Divyang should also be included in poverty alleviation programs so that they can participate

in government jobs of 04 percent by the constitution.

Machinery for Persons with Disabilities, Training Center for Persons with Disabilities in the work environment at the workplace, there should be a barrier free environment in industries programs.

Skill development centers for various industries under small and micro industries with a creative approach, after training for the differently abled, loans from government banks / assistance in government organizations etc. for the industry.

Various state level Department of Empowerment of Persons with Disabilities and District Department of Empowerment of Persons with Disabilities should increase new creative and employment opportunities from time to time.

Barrier free environment:

Government efforts for development of barrier-free environment The following strategies should be made for creating a barrier-free environment:-

Public buildings, offices, from functional and recreational point of view, barrier-free tactile tiles should be used for the movement of persons with disabilities, so that the movement of visually handicapped people operate smoothly.

In public places such as railway, station, bus, and stand-mall and under all educational institutions, there should be use of sensory devices for the disabled so that they do not face any kind of inconvenience.

The details of seats for pre-determined persons with disabilities in all universities and other institutions under educational rehabilitation should be clear along with the form along with the admission form.

Use of sign language should be encouraged in all public places so that the concerned persons with disabilities can make their life successful without any hardship.



Public accessible toilets, workplace toilets, toilets in railways, trains and bus stands, toilets for differently-abled people should be constructed

All the states, municipal bodies, panchayats, institutions of the country should make necessary rules and regulations to comply with the laws and place standards - ensure that the newly constructed public buildings are free from obstruction in public.

Under the supreme body of the legislature of the country, the participation of 04 percent should be completely from all the countries, as well as the participation of 04 percent should be ensured under the Legislative Assembly of each state.

Railways, State Transport Undertakings and Airplanes should make facilities for the disabled in their vehicles under a barrier-free environment for the disabled, so that the barrier-free movement would be implemented smoothly. Friendly to the nations: I.T. It is essential to keep the environment in the systems.

Required Divyang:

Vayujan shall be balanced with a combination of the formula combination of e-communication and interaction with the data with the formula of training with the technology tight time frame for at least 06 months.

Social Security:

Social Security providing social security to the differently-abled will be the basic responsibility of the general public and the family in the society, from time to time, the Central Government and the State Government will issue, to provide social security, various implementing agencies (NGOs/ NGOs) for actual social security/rehabilitation. Grants-in-aid to NI / DDRC / ALIMCO/State Handicapped Development Corporation / other local bodies), the following measures should be taken under social security by the Central Government and the State Government;

The policies approved for the disabled are reviewed at regular intervals, after 19, necessary income tax and other tax relief is available to such persons.

- Do something good, to generate employment after training in skill development centers along with parenting money (pension) and unemployment allowance in the central and state governments.
- Different insurance companies should be specially insured to double the amount of social security and life insurance.
- Their families should get special insurance coverage in case of various simple accidents, deaths.
- Any kind of litigation and other related advice related to the disabled in the court should be completely free.
- In case of any kind of exploitation or victimization, the guilty person must be punished constitutionally with immediate effect.
- Divyangjan must get equal opportunity, protection of rights and prior participation in the society. Therefore they can integrate with the mainstream of society.
- The Central Government and the State Governments must make a welfare policy for all the differently-abled from the socio-economic point of view.

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Acid Attack Survivors in the Light of RPWD Act-2016

A Critical Study

Shankha Shekhar Rakshit

Abstract

IL Rights of Persons with Disabilities, Act (2016). an important step in the history of Indian Constitution, implemented life upliftment of Individual with Disabilities. This law protects disabled person's rights in all aspects of their lives, including social life, education, and employment. The number of recognised disabilities has risen from seven to twenty-one, with acid attack victims becoming one of them. The (RPWD) Act of 2016 addresses some of the long-standing requests of disabled people in India. According to the National Crimes Record Bureau (NCRB) 2016 annual report revealed that there were 283 acid attacks reported in India.

A total of 307 people were affected by these incidents. West Bengal topped the list with 76 incidences and 60 survivors out of all states. In government jobs, this Act allows for a 4% reservation for persons with disabilities. Acid attack survivors are lumped into the locomotor disability category for work quota purposes, which receives a 1% reserve. This study aims to critically examine the Acid Attack victim in the light of (RPWD) Act 2016, based on research articles, reports, literature reviews etc. As it is adopted by the govt of India recently, there are less number of studies were found and no study have been conducted on the Acid Attack Victims in the Light of (RPWD) Act 2016.

Introduction

Every year India has the maximum number of acid attacks in the world, and despite the Indian regimes and the Supreme Court's efforts,

the crime is on the increase. This growth can be related to India's patriarchal mindset as well as the country's ineffective legal system, which fails to provide victims with effective remedies. Acid attacks are common in any country, highlighting that the country has failed to safeguard its citizens against this type of injury. Some countries, including India, have taken stringent efforts to combat acid assaults, with many of them succeeding. Acid attack is the most heinous, indescribable, and dehumanizing act ever perpetrated against a woman. Acid attack is one of the most terrible crimes against humanity, resulting in total debilitation, loss of prospects and income. Even social reconditioning. The consequences are not transient, but rather permanent and persist for the rest of a person's life. She is not only physically and psychologically harmed, but also financially, emotionally, and socially isolated. Society is unable to accept the looks and blemish are connected with the woman. Acid attacks are now classified as a separate offence under sections 326A and 326B of the Indian Penal Code, which was amended in February 2013. The first data available following the amendment were from 2014, when 349 incidents were recorded from across India. (Bajpai, 2015; Singh 2015). More than 50% of the cases were between the ages of 30, and with the 18-28 year age group being the most common. Behind the reason of attack was a difficulty with a relationship. Acid attack victims were all deformed, with 78.8% having vision problems. In eight cases, blindness was experienced on both sides. The victims are primarily from metropolitan areas, accounting for 65 percent of the total. Over 90% of the victims had a facial



burn of more than 2%. (Singh et.a1.2018).

Acid Attack Survivors:

Acid attacks are a big problem across the world, and in most cases, children are victims of acid attacks. When acid is thrown towards the victim's face or body with the intened to burn and spoil them. The majority of the victims are young women, many of whom are under 18 of the age, who have denied the sexual approaches or marriage promises. The act of throwing acid upon a person's body "with the goal of harming or disfiguring [them] out of jealousy or retribution" is known as an acid attack or vitriol age. So many problems are handled by acid attack victims are:

The face and body are permanently damaged. Deafness, Seeing problems, Communication and eating skills are harmed. Respiratory problems, social problems Economic problems, as well as psychological glob le ms

Table 1: Cases of Acid Attacked in India (2010-2019) Acid attack victims in India (2010-2019)

Year	Numbers of victims Reported
2010	80
2011	83
2012	106
2013	122
2014	309
2015	222
2016	167
2017	244
2018	228
2019	240

Source: Kannadasan, 2015; National Crime Records Bureau (India), reports of 2010-2019

Their Position in (RPWD) Act, 2016:

The Rights of Persons with Disabilities Act (2016) was adopted under Article 253 of the Indian Constititn. as well as Union List item No. 13. There was a huge need for such an Act in India because there was no complete law that could identify and execute the Rights of Persons with Disabilities (RPWDs). This Act is considered comprehensive, and it attempts to give those with disabilities in India with equal opportu • y. The number of different categories of disability has been raised from seven to twenty-one. e Central Government will have the power to expand this list of disabilities_

Major shifts:

The Indian government passed the Act, Persons with Disabilities (PWD) in 1995 "qua! Opportunities, Protection of Rights, and Full Participation) After major protests and petitions. The victim of acid attack and the burn survivors were not mentioned in this act. RPWD act (20 16) did not adequately recognize burn survivors, but it pro led protection to a subset of burn survivors. The legal provisions will have to be examined in order to cover burn victims under this act. The (RPWD) 2016 Act, has been in effect for nearly a year. In India, the Act has been addressed as a game changer for Persons with Disabilities. One of the most significant changes is the increase in the number of infirmities from seven to twenty-one. However, few people are aware of these changes. For the first time, survivors of acid attacks have been classified as disabled. A person who has been subjected to a ferocious attack as a result of acid or another caustic chemical being thrown at them is referred to as an acid attack victim. In maximum cases, acids or destructive chemicals are thrown at the face, resulting in skin roasting, tissue damage, and in some circumstances, bone dissolution

in some severe attacks. The (RPWD Act) 2016 supersedes the (PwD Act) 1995, and the RPWD Guidelines 2017 outline how the provisions should be carried out. The following are the most important changes:

- Improved terminology definitions and operationalization
- Given the importance on the Rights of Persons with Disabilities
- Discrimination-prevention measures
- Give emphasis on inclusive approach to education and work
- The procedure for naming a Limited guardian, as well as - The section on violations of the rules and the punishments for them.

Rights of Acid Attack Survivors in (RPWD) Act, 2016:

This Act ensures all the rights of Persons with Disabilities and acid attack survivors are included under 21 disabilities. There are so many rights mentioned, such as:

The (RPWD) Act of 2016 allows 4% reservation in government jobs for People with Disabilities. Acid Attack victims are endured into the Locomotor Disability type for job quota purposes, which receives 1% reservation. victims to get enrolled in educational institutions. There is the need for material, human and ideational resources suiting to the needs of 'all' children to get the things done on real ground.

- For vocational training and self-employment, the government will develop schemes and programs, including low-interest loans, to make them independent. This provision is definitely in the interest of the differently-abled, as financial barriers are often a major concern over their admission to higher education or start a start-up.
- The government offered a five-year age relaxation for entrance to higher education institutions. Due to their certain limitations,

it is not possible for them to complete their course on time as like the regular students. Such a provision is a great step to ensure equity of treatment towards them.

Conclusion:

Ucid attacks have hit every country on the planet. Acid attacks are common in affluent countries such as the United Kingdom and the United States, as well as developing countries like Bangladesh, India, and Pakistan. Though the majority of attacks occur on Asia and Africa's continents. Contempt the fact that protocols exist in India to prohibits the sale and easy access of hazardous chemicals, acid assaults continue to occur. After such events, a survivor's life is drastically altered. The Indian government has been recognized acid attack victims as worthy of care and relief by putting them in (RPWD) Act in 2016.

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Menstruation and Menstrual Hygiene among Visually Impaired (V.I.) Adolescent Girls

Dr. Ruby Verma

Abstract

Menstruation continues to be a subject of gender disparity in India. Myths about menstruation are largely prevalent, forcing many girls to drop out of school early or be ostracised for the duration of their menstrual cycle every month. A 2014 report by the NGO Dasra titled 'Spot On!' found that nearly 23 million girls drop out of school annually due to lack of proper menstrual hygiene management facilities, which include availability of sanitary napkins and logical awareness of menstruation (Dasra, 2014). The report also came up with some startling numbers. 70 percent of mothers with menstruating daughters considered menstruation as dirty and 71 percent adolescent girls remained unaware of menstruation till menarche.

Recently, while breaking all taboos, a film based on menstruation won the Oscar. 'Period. End of Sentence, a documentary that tackles the stigma around menstruation in rural India, has won the award of best documentary film. The 26-minute film revolves around a group of women who use a new machine in order to create low-cost sanitary pads so that women in their village can be financial independent and at the same time improve their feminine hygiene.

Menstrual hygiene practice is a turning point among blind adolescent girls. They need assistance in identification, placing menses materials, washing the menses clothing's and disposal of used menstrual materials. Various studies on menstrual hygienic practice and problems were studied. The sensation of itching,

burning, redness, rash, staining of cloth, and slip of pad were significantly lower for the study pads than reference pads (Stadler et al., 2006). Poor menstrual hygiene in developing countries has been an acknowledged problem till now. The lack of attention to this issue is striking. Approximately 50% of the world's population knows from their own experience, how important good menstrual hygiene is to be able to function optimally during the menstruation period. Yet this is hardly realized in particular, by programmers and policy makers.

Key Words: Menstruation, Menstrual hygiene, knowledge, practice, tabaccoo, etc.

Introduction:

355 million is the number of menstruating women in India, accounting for nearly 30 per cent of the country's population. Menstruation continues to be a subject of gender disparity in India. Myths about menstruation are largely prevalent, forcing many girls to drop out of school early or be ostracised for the duration of their menstrual cycle every month. A 2014 report by the NGO Dasra titled 'Spot On!' found that nearly 23 million girls drop out of school annually due to lack of proper menstrual hygiene management facilities, which include availability of sanitary napkins and logical awareness of menstruation. The report also came up with some startling numbers. 70 percent of mothers with menstruating daughters considered menstruation as dirty and 71 percent adolescent girls remained unaware of menstruation till menarche.



A 2014 UNICEF report pointed out that 79 percent girls and women were unaware of menstrual hygiene practices in Tamil Nadu. The percentage was about 66% in Uttar Pradesh and 56% in Rajasthan. However, a lower ratio of about 51% has occurred in West Bengal. The problems with menstruation in India are that they are similar to a chain of command, related to each other. There is no awareness on menstruation, hence it is considered dirty. Being a 'dirty' occurrence, a menstruating girl is isolated or forced to drop out of school as unlike urban areas, access to sanitary napkins in rural areas is low. The figure below will explain the figures easily:

Personal hygiene is a process performed by human beings to protect their body and keep themselves healthy. It is a behaviour that must be practiced in daily life, starting from the morning till sleep time to protect our health. It involves those practices which are performed by an individual to care for one's bodily health and well being, through cleanliness which is important in every stage of life. It needs all the five senses to take care of the body which is a gift of God. Vision, smell, touch, taste, and sound are the easily counted five senses which altogether complete human body. Although, all of these senses are equally important to survive but vision is an important sense of human life.

Any living being whether human or animal or any creature can only be able to see anything in the presence of light. Science also proves this fact that, one can see in light only and without it nothing can be seen. Vision is an important sense which enables any living being to see and embrace the beauty of this world. World can be sensed only 90% through the eyes which means vision is the important among all the remaining senses. Therefore, it's tough to imagine the life of visually challenged adolescent girls and above that, the utmost issue is being girls it is very hard for them to manage their life as well as practicing regular hygiene process. They face it challenging to embrace and nurture their womanhood, as menstrual hygiene is scantily recognized and not

received appropriate attention.

Adolescence is that stage of life which bridges childhood and adulthood, having positive recourses of the body with unlimited energies, power, and strong urge to create new things. Adolescent has been characterized as developing dynamites, enthusiastic, exploration, which gets easily depressed, anaemic and aggressive. Hence, it is a very crucial period especially for girls facing highly typical psycho-emotional problems like depression and loneliness. It is a proven fact that, in the world of despair, negligence, and isolation to lead a normal daily life is a big hindrance for the disable person. Especially, a visually impaired adolescent girl needs enormous effect to sustain her in the world. Females in every hook and corner of the world in all caste, colour, and religion have a significant high risk for being visually impaired than males because of their longer life expectancy, poor societal issues, and lack to services (WHO 2000).

Previous studies have also explained that, it is one of the biggest challenges for adolescent girls to manage their menstruation which is a normal process of female body (Thérèse & Maria, 2010; Kumar & Srivastava, 2011). Menstruation is an important and a normal reproductive system of female body which should be accepted and considered as any other normal body function like bathing, brushing, combing hair. However, due to traditional societal culture and backward thinking, it is still an un-discussable topic in Indian society (United Nations Children's Fund, 2008). A number of old societal taboos and socio-cultural restrictions still exists in Indian society concerning menstruation (Dhingra, Kumar, & Kour, 2009; Paul, 2007; Singh, 2006), which intimidates young girls and make their life difficult. Therefore, menstruation is in general is unwelcomed by the adolescent girls.

However, with more of technological changes and government initiatives urban India is changing slowly too in terms of girls education, liberation, and freedom. Another part of India lives in rural area, which is still improving and liberating their thoughts regarding menstruation.

Due to, backward thinking and a matter of shame, menstruation is still not discussed openly among families. Instead, it is considered as a disease and the person is treated as untouchable. In such conditions, when the girls who are at the age of adolescence and having visible imparity find it difficult to handle their menstruation cycle. Recently, on the occasion of International Women's Day, a book related to menstrual hygiene in Braille has been released by a social organization (TOI, 2018). The main purpose of this initiative is to spread the awareness among visually impaired adolescent girls. The organization has distributed around 2500 free copies of the book among young girls who are visually impaired. Although menstruation has been studied before in different contexts but the above mentioned issue has not been studied in specific concern to visually impaired adolescent girls in rural districts.

Personal hygiene generally includes cleanliness of the body and proper maintenance of personal appearance. It basically covers all the body areas and clothing. Hygiene is an old concept related to medicine, as well as to personal and professional care practices related to most aspects of living. In medicinal, domestic, and everyday life setting, hygiene practices are employed as preventive measures to reduce any chance of infection and spreading of the diseases. The below diagram will explain the hierarchy of health in a normal daily life:

The above given figure shows the hierarchy of hygiene which flows from bottom to up. It is essential to maintain physical hygiene first which results in proper healthy mental hygiene by removing old and useless social taboos. This further results in improving the perception of society through awareness regarding importance of hygiene and explaining reasons to maintain hygiene during menstruation along with maintaining the same in regular life also.

Menstruation is that period of month which asks for extra care of health and hygiene. It is the time when females come out different kinds

of mood swings, menstruation cramps, following daily practices of healthy life. Menstruation assimilates countless myths and mysteries which are considered as necessary to be strictly followed. However, health and hygiene are two most important issues are mostly ignored while following predefined customs and rituals. Irrespective of caste, culture or any background it is important to create awareness about menstrual hygiene among visually impaired adolescent girls. It is important to educate all girls who are reaching their adolescent about menstruation and menstrual hygiene if a healthy and progressive nation is to be developed.

It is first and foremost important thing for growing girls to make them aware of their body changes and process. They need to be given proper education about menstruation and methods to take care of their body and health. They should be taught about the importance of hygiene during menstruation and how to handle issues like menstruation cramps, weight gain, hormonal changes, body changes etc.

Education regarding menstruation and menstrual hygiene is equally important for young adolescent girls who can partially see or have visual disability. With proper guidance, education, and support they can manage this period with ease and also be able to handle menstrual hygiene in a proper manner.

EFFECTS OF POOR SELF HYGIENE

Menstruation is just not considered that period of month where girls are considered as dirty or untouchable. With the advent of internet, media, advertising and initiatives taken by several NGOs, menstruation has been scientifically proved and accepted as a regular process in female body just like delivering baby. From a matter of shame, it is transforming into a matter of natural process like bathing, toileting, brushing and is now discussed in homes too. Therefore, it has become necessary to now discuss the topic of menstrual hygiene which is significantly important for the health of a female and the whole human society.

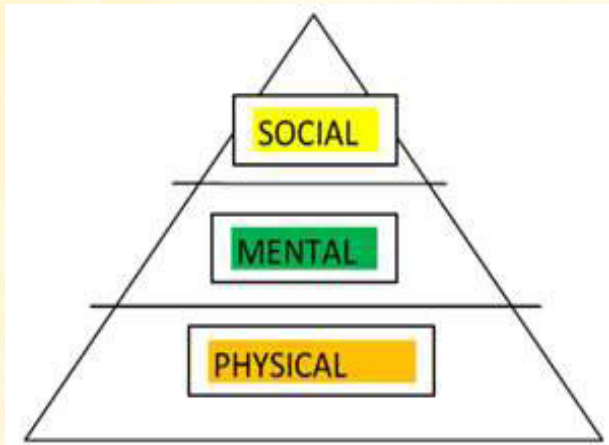


Fig. 2: Hierarchy of hygiene

Hygiene practices helps in the prevention of germs. It minimizes the risk of spreading infectious diseases which are considered as disorders caused by organisms such as bacteria, viruses, fungi or parasites. Lack of hygiene prevention results in microbial growth of germs that leads to various infectious diseases specifically among young children and adolescent. Adolescents with poor self-hygiene may get discriminated by other girls for having dirty body and foul odour consisting of inappropriate clothing and greasy appearance. Such type of criticisms may harm their self-esteem and make them more negligent towards themselves. Adults also get a poor impression of the child and may even suspect parental negligence if, the child is young to be dependent on their parents for keeping them clean.

Thus, many of the initiatives have been taken by Government and NGOs to improve such conditions such as Menstrual Hygiene Day which is now celebrated on 28th May, free distribution of sanitary napkins in school, innovative and environment friendly cloth napkins which can be washed and sterilized, Swachh Bharat Abhiyan to provide free toilet facilities for public and many more.

Indian government has taken into consideration these matters seriously after the cases like causing of tetanus to a woman while using cloth during menstruation, and prevalent

of bacterial vaginosis, yeast infection, vaginal cancer, and many horrible diseases causing loss to human life in particular woman. Menstrual hygiene is utmost important not only for normally visionary girls but also for the visually handicapped adolescents. This study will help in identifying the practices followed by such girls and problems faced by them to maintain their menstrual hygiene.

Menstruation

Menstruation is the process of regular discharge of blood and mucosal tissues from the inner lining of the uterus through the vagina of females. It starts at the age of 12 or 13 generally. It is a unique phenomenon for females. It is the onset of most important changes occurring among the girls during adolescent years. Most of the times, first menstruation (menarche) occurs between 8 to 15 years with the mean of 13 years. Adolescent girls constitute a vulnerable group particularly in Indian society. The reaction to menstruation depends upon awareness and knowledge about the subject.

Menstruation is normally taken as dirty topic and not at all discussed in Indian families. However, menstruation is the period which signifies the transition from girlhood to womanhood. Thus, it is a sensitive issue which should be handled carefully by family members. The manner in which girls learn about menstruation depends upon their awareness and knowledge about menstruation and its associated changes which may have an impact on their response to the event of menarche.

Although menstruation is natural process, it is linked with several misconception and practices, which sometimes results into adverse health outcomes hygiene related practices of adolescent during menstruation are of considerable important. Menstruation is considered as impure and polluted in Indian society. Girls are treated as diseased and untouchable ones. They have been forced to

remain isolated in the family. Many of the girls are restricted to enter in few areas of home like kitchen, worship area, garden or attend to guests or cook for themselves or others for mostly initial three days of their periods. In most places girls are not allowed to attend guests, play with their friends, or attend their schools. In some rural areas females have to spend their menstruation period at the outskirts of their village. They are not allowed to be in contact with anyone not even their family member during that period. They have to cook for themselves and manage their challenges all alone without any friend or relative. This all depicts a poor and miserable condition of females in the fast and progressive nation.

Different materials or products can be used to absorb menstrual blood. These include cloth, sanitary pads, tampons or a menstrual cup. Cloth and menstrual cups can be washed, cleaned and reused, but sanitary pads and tampons must be disposed after one use. They are also beneficial for sustainable environment.

Such taboos restrict not only their growth but also affect their physical hygiene. They feel secluded and feel bad for themselves. Most of the girls feel it a matter of shame and do not discuss their problems with their parents. In few families it is forbidden to use sanitary napkins. People feel it shameful to purchase sanitary napkins from medical outlets. These all activities are not only harmful but also limit girls to follow proper hygienic practices. The following prescribed hygiene practices to be followed during menstruation are as under:

Practices regarding menstruation: Menstrual hygiene is very important to prevent infections or diseases caused due to local itching and bad odour of vagina. It is important for girls to wear cotton innerwear during their periods, wash them properly, and make them dry under sun so that the germs got destroyed. It is not necessary that girls will always be using sanitary napkins. However, those living below poverty line use self made pads through cotton and cloth. However, few living in rural areas are forced to use simply

cloth. In worse conditions females are forced to use rags, dirty clothes, sand, etc. Therefore, it is suggested that if someone is using clothes then they should wash and sterilize the used cloth with Dettol. They should also make sure that, the cloth should be dried under sun in order to kill the germs. It is important to wash clothes using soap and water. Also they should make sure that after using the toilet and changing the pads, they should change the clothes and sanitary napkins on regular intervals. The figure below exhibits the following resources to maintain menstrual hygiene.

Such healthy practices help females in making them confident and stress free. Good hygienic practices such as the use of sanitary pads and adequate washing of the genital area are essential during menstruation. Women and girls of the reproductive age need access to clean and soft, absorbent sanitary products which can in the long run, protect their health. It should be considered as a key priority for females to attain necessary information about facilities and global environment to manage menstruation with proper hygiene and with full dignity. A qualitative assessment showed that, involvement of males generated a more positive environment for establishing MHM (Menstrual Hygiene Management) counselling centres and supporting women's involvement with them (WaterAid, 2015).

Menstrual hygiene is to equally important for visually impaired adolescent girls also. Those girls who are physically impaired also need to be taught about menstrual hygiene. They have to be cautious about their health and hygiene in order to prevent themselves from diseases or infections.

Vision among other senses is one of the most valuable assets. In the absence of it, people face complexities to deal with daily hassles, especially in case of self hygiene. When vision is related with adolescent girls it becomes more complicated as they have to manage each and every thing with care because menstruation is still a taboo and people don't like to talk



Material to be used during Menstruation

about it. Therefore, it is considered to check the awareness level of self hygiene among visually challenged adolescent girls.

A KAPB (Knowledge, Attitude, Behaviour, and Practices) study has been conducted in 1999, which shows that, there is a definite increase in health and hygiene awareness among common folks. Safe health practices have been carried out in area with health clubs along with the areas which are not having health clubs (Mathew and Mukuwe 1999).

Similarly, a cross sectional study has been conducted in two randomly selected inter colleges to find out the practices of menstrual hygiene among adolescent girls in a district of Uttarakhand which shows 64.5% girls (71.15 girls of rural and 57 % urban) were aware about menstruation prior to the attainment of menarche. Awareness among rural girls was significantly more as compared to urban girls. Over 38.4% of adolescent girls (48.1% rural and 27.6% urban) were using sanitary napkins as menstrual absorbent while 30% were using new clothes/rugs every time. Below figure will explain the percentage distribution of knowledge during menstruation:

They found that, there is a need to educate girls about menstruation, its importance and hygiene maintenance, in order to enable them to lead a healthy reproductive life in future. It also saves them unseen future risks like infections, or chances of cancer, or any dangerous issue related to uterus or vagina.

To address the above mentioned issues, this study has been initiated among visually impaired adolescent girls to understand the

challenges faced by them. It is important to go through this study for societal benefit because once the challenges come in front of researchers then they could be able to design the strategies or find out solutions to handle these challenges or problems in Indian society.

Conclusion

Majority of the girls had good menstrual hygiene practices. Although most girls reported bathing three times or more, this impacted their school attendance since they would go back home to do this. Most girls said that their parents provided them with absorbent materials contrary to advocacy calls for schools to do so. If these issues are addressed, they could help address absenteeism, which was one major challenge, as many girls reported going back home to manage their hygiene demands or totally stayed home through the days of their period. This confirms assertions that the onset of puberty leads to significant changes in girl child participation in schools as they behind with missed days or completely drop out because of menstrual related challenges.

Suggestions

For some time now, activists, politicians, and organisations have been demanding that the central government scrap taxes on sanitary napkins. From better attendance of female students in schools to better employment



Resources for maintaining Menstrual Hygiene

opportunities for rural women, they have listed a number of reasons for doing so. And while that may be a good thing to do, menstrual hygiene is an issue that demands action on multiple fronts, as some have already highlighted. Take for example, the case of a group of women advocates in Tamil Nadu who filed a petition before the Madras High Court last year demanding that not only 'Napkin Vending Machines' be installed in government schools but incinerator for safe disposal of napkins be also provided for.

The court then ordered that sanitary napkins be provided in all government schools for girls, in co-education high schools, and higher secondary schools. "The quality of the Napkins should be ensure," the court said, while pronouncing this order for immediate implementation. The court also ordered that at least one operational incinerator be installed in all government schools by the end of the academic year.

The order just goes on to show that we can demand more from the government when it comes to the issue of menstrual hygiene. There are in fact guidelines under Swachh Bharat Mission that address the issue of menstrual hygiene. Here are some areas the government is required to work in as per the guidelines that you can demand action :

1. Water, Sanitation, and Hygiene Facilities

The guidelines intend to convey that menstrual hygiene doesn't just begin and end at using sanitary napkins. No wonder a number of ministries such as the Ministry of Drinking Water and Sanitation, the

Ministry of Human Resources Development have been asked to provide for these facilities. In schools, the guidelines say, women – both students and staff- must have "clean, easily accessible water and soap to wash themselves, wash their clothing if soiled, and wash menstrual

cloths or reusable napkins". Not only should the water be provided "inside the toilet", a mug to dispense water should also be available. A well-positioned mirror for checking stains, a private bathing/changing unit, including a place for drying reusable menstrual adsorbents, are other infrastructural facilities required to be provided in schools.

2. Disposal Mechanism

Disposing used napkins in the open, in water bodies, or in public places not only are not helpful for sanitation workers, they can also have adverse effect on the environment. The guidelines therefore also require that schools provide for disposal bins preferably within each cubicle for collection of such waste. Further, these bins should have close fitting lids to minimise seepage of waste. If disposing the waste offsite, schools can either seek the help of solid waste management system or hospitals which have safe treatment unit for hazardous waste. However, as transportation can be a logistical problem for rural schools, they are advised to use "deep burial, composting, pit burning and incineration" for disposal.

3. Menstrual Health Practice Education for Men Too

Many women face stigma and discrimination while menstruating from men, a problem that the government has recognised. "Informed adolescent boys, male teachers and parents contribute to a supportive environment for adolescent girls in school and at home," the guidelines developed by the government in 2015 say. The Rashtriya Bal Swasthya Karyakram medical teams visiting schools are therefore required to hold educational sessions around menstruation for both girls and boys. Fathers and male teachers should also be sensitised and informed about needs of adolescent girls, according to the government's guidelines.



4. Budget for Menstrual Hygiene

Many state governments haven't been prompt or judicious in utilising funds for a scheme meant for menstrual hygiene. The new guidelines say that allocating required budgets for dissemination of information and education as well as for capacity building of teachers is a must. Moreover, the guidelines also provide a model framework for allocation of these funds. Unfortunately, expenditure particular to Menstrual Hygiene Management (MHM) isn't maintained by the central government under all schemes. It is also data that may not be readily available unless the government audits these schemes specifically find out the money spent on MHM. But there's always the Right to Information Act which you can use to request information on such expenditure from your local administration or government. Only 12% women and girls in the country who menstruate have access to sanitary napkins. It's not enough to just demand sanitary pads. There is a lot more that we need to do in order to make sure this statistic changes. Let's ask the government to address this issue in its entirety.

Providing information through regular sessions regarding menstruation and body anatomy

Safe disposable methods and stigma and taboos to school girls through teachers and creating leaders in school who are the go-to people regarding problems of girls in schools and school teachers.

- While the games are appropriate for various groups and locations, the training facilitator should take the local socio-cultural context into account when preparing for sessions on menstruation. Focus group discussions and site visits prior to the trainings are essential in this regard.
- Along with promoting learning through games and activities, it is important for facilitators to ask open-ended questions, rather than lecture or impose their own knowledge or opinions on participants.

- Facilitators should work to create a comfortable atmosphere and ensure participants have fun.
- WASH United recommends that the facilitator conduct additional visits a few weeks after the training is completed to allow girls to reflect on the training and to ask follow-up questions. Ideally, these visits are combined with end-line data collection to evaluate the effects of the programme on students' knowledge and attitudes.

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A Study on Persons with Disability in Gujarat

Rajendra Patel

Disability occurs as a result of the interaction between the impairment and attitudes and fix environments that prevent equal participation for people with impairments in so', ty. The definition of disability encompasses a wide range of impairments including ion -term physical, mental, intellectual, and sensory impairments combined with various barriers that can limit someone's ability to participate fully and effectively in society. More than 400 million persons with disabilities live in developing countries. Based on the 2011 Census, India's total population is 1.23 billion, of which 2.1% are disabled. In Gujarat. 1.81 percent of the population is handicapped. present study focuses the disability status in Gujarat and their educational status, marital status in Gujarat. This (Judy analyzes Gujarat's disability status using the Census 2011 data, and focuses on the number of disabled, their distribution of disabilities by type of disability, their age, their education level, and their marital status. it has been found that men have a greater number of disabilities than women in Gujarat. Among the disabled population, 164902 individuals have at least matriculated/secondary schooling, but have not graduated, and 57842 have graduated. Currently married male disabled are higher than female and also never married male disabled are higher than females.

Introduction:

Census 2011 shows that 2.68 crore people have disabilities; they le up 2.21 percent of the country's population. Through its Department of Individuals with Disabilities, the Ministry of Social Justice & Empowerment works to

empower individuals with disabilities. There are also people with disabilities involving visual impairments, hearing impairments, speech impairments, body movement impairments, mental illness, and multiple disabilities,

Disability is an inevitable part of being human. Almost everyone will experience some form of disability, either temporarily or permanently, at some time in their lives. Almost one billion individuals, or over 15% of the global population, have a disability, and the number is rising.

The Oxford Dictionary describes it as, Disabilities can be defined as impairments that are intellectual, physical, cognitive, sensory, or a combination of all of these. Persons may have incapacity at birth, which impacts their abilities. Adulthood may sometimes bring about such a situation.

The deirption "disability" (participation restrictions) includes any physical or mental condition (impairment) that makes it more difficult for a person with the condition to carry out certain tasks (activity limitations) and interact with the environment around them.

We have the moral duty to address the barriers we face as people with disabilities: attitudinal, physical, and financial. Addressing these barriers is within our reach and we have a moral obligation to do so. . In addition to unlocking people potential to contribute to the orld, removing these barriers will let so many others shine. No longer can governments let hundreds of millions of people with disabilities go without access to health care, rehabilitation, education, and employment because they can't



stand a chance.

Stephen Hawking

The disability may affect an individual in many different ways, including this:

- Vision
- Movement
- Thinking
- Remembering
- Learning
- Communicating
- Hearing
- Mental health
- Social relationships

It is commonly believed that "people with disabilities" mentions to a particular group of people. The truth is that it refers to individuals from different groups, all with different needs. Two humans with the equal disability can also additionally have substantially special results. Some disabilities are tough to stumble on or conceal.

According to WHO, disability has three dimensions:

1. A loss or reduction of body function or physical or mental impairment; examples include the loss of a limb, a decline in vision or impaired memory.
2. Limitations to activity because of difficulties seeing, hearing, walking, or completing tasks.
3. The lack of ability to take part in regular every day activities, including working, carrying out social and recreational activities, or receiving preventive care and fitness care.

People with disabilities are often faced with limitations as a result of physical and psychological conditions such as cerebral palsy, down syndrome, and depression, as well as social

determinants such as unfavorable attitudes, inaccessible transportation, and a lack of social support. (WHO)

The following are examples of disabilities:

- All of these components, including cognition (storage, knowledge, comprehension), mobility (moving around in an environment), sight, hear, and behaviour, are influenced by anomalies that are present at birth and may persist until maturity. These conditions could be
 - Single-gene disorders (such as Duchenne muscular dystrophy);
 - Chromosome abnormalities (such as Down syndrome)
 - This is the result of a pregnant woman being exposed to a disease (such as rubella) otherwise drug (such as cigarettes/ alcohol).
- Attention-deficit/hyperactivity disorder (ADHD) and autism spectrum disorder (ASD) are two developmental disorders that affect children.
- Involved with damage (for example, traumatic brain harm or spinal cord damage external icon).
- It can be caused by long-term diseases (such as diabetes) that can cause eyesight loss, limb loss, or nerve damage, for example.
- A chronic disorder (as an example, muscular dystrophy), a stationary disorder (for disorder (sclerosis) may manifest.

2. Objectives:

1. To study the gender and different types of disabilities in Gujarat.
2. To study the Education level of disabled people in Gujarat.
3. To study the marital status, age and gender of disabled people in Gujarat

3. Research Questions:

1. What is the status of different types of disabilities in Gujarat?
2. What is the status of males and females disabled people in Gujarat?
3. What is the education status of disabled people in Gujarat?
4. What is the marital status and reason of never married people in disabilities in Gujarat?
5. What is the age and gender-wise marital status of disabled people in Gujarat?

4. Methodology:

In addition to the Decennial Population Census, disabled persons are also included in NSSO surveys (which are periodic but not regular). In India, the latest data on disabled persons can be found in the 2011 Census directed by the Office of the Registrar General and Census Commissioner. The study focuses on the number and distribution of disabilities, their age groups, educational levels, and marital status of the disabled in Gujarat based on information from the Census 2011.

5. Disability status in India and Gujarat

In India, 2.21% of the 121 billion population is considered disabled, which equates to 2.68

billion people. Gujarat has a population of 6.04 crores, according to Census 2011 data. According to the 2011 census, up from 5.07 crores in 2001. According to the 2011 census, Gujarat has a population of 60,439,692, of which 31,491,260 are males and 28,948,432 are females. The population of the nation was 50,671,017 in 2001, with a male population of 26,385,577 and a female population of 24,285,440. In this decade, total population growth has been 19.28%, compared to 22.48% in the previous decade. India's people of Gujarat are 4.99 per cent in 2011, down from 4.93 percent in 2001. In Gujarat, 1.81 percent of the population is handicapped.

5.1. Types of disability and Gender of disabled population

There was information collected on five types of disability (vision impairment, hearing impairment, speaking impairment, and movement impairment) in the 2001 Census. Information on 8 types of disabilities, including both cognitive disabilities and physical disabilities (chromatic hurt, hearing deficiency, speaking impairment, mobility difficulties, mental illness, and multiple disabilities), was collected as part of Census 2011. A total of eight types of disabilities were attempted, compared with five in Census 2001.

Census figures from 2011 reveal that the total number of persons with disabilities in Gujarat was 1092302, as per Table 1. The total population consists of 612804 males and 479498 females.

Table-1

Different types of disabled population in Gujarat

Total disabled population		In seeing	In Hearing	In Speech	In Movement	Mental Retardation	Mentally III	Others	Multiple Disability
Persons	1092302	214150	190675	60332	245879	66393	42037	197725	75111
Male	612804	113617	100441	35277	149263	39309	24943	107415	42539
Female	479498	100533	90234	25055	96616	27084	17094	90310	32572

(Source: Census of India, 2011)



Graph-1

In Gujarat. the percentage of disabled people by disability types.

In Gujarat, the census 2011 reported 22% of the disabled persons have mobility problems, 20 % have vision problems, 17%, have hearing problems, and 4 % have mental health issues,

Graph-2

Male, female, and du us types of disabled population in Gujarat

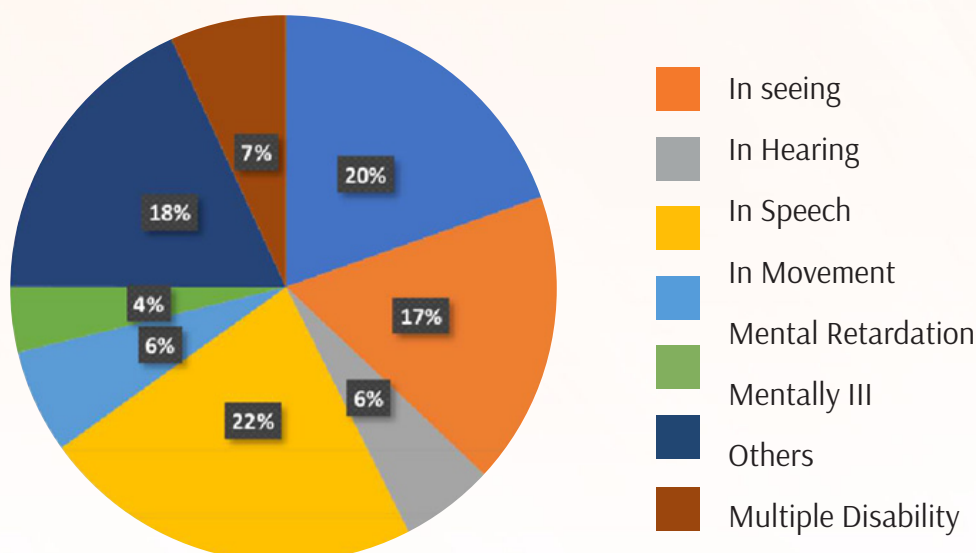
On graph No. 2, it is shown that men are more

Table-2

Educational level of disabled persons in Gujarat

Educational level	Total disabled population		
	People	Men	Women
Over-all	1092302	612804	479498
Uneducated	405859	184031	121828
Educated	86443	428773	257670
Learned but below primary	145977	86753	59224
Primary but below middle	166808	99259	67549
Middle but below matridsecondar	101942	68321	33621
Matric/Secondary but below graduate			
Graduate and above	57842	36985	20857

(Source: Census of India, 2011)



affected than women for all of the impairment types.

Men with disability stiffer from movement disabilities at 149263, vision and hearing disabilities at 1136 17 and 100441 respectively, as well as multiple disabilities at 42539.

Women with disabilities include 100533 and 90234 having disabilities related to seeing and hearing, 96616 having disabilities related to movement, and 32572 having multiple disabilities,

5.2. Education Status of disabled population:

Gujarat has a literate population of 79.31%. In Gujarat, 62.84 % of the disabled population is literate.

Out of the total disabled population, 686443 are literates, 164992 have matriculated/ graduated but have not completed their university degrees, and 57842 have university degrees.

The disabled male population has 428773 literate members, 108510 of which are matriculated or have finished secondary school, and 36985 who have completed graduate school. About 8.42% of the disabled male literates are graduates.

The female disabled population has 257670 literate persons, 56482 of whom are

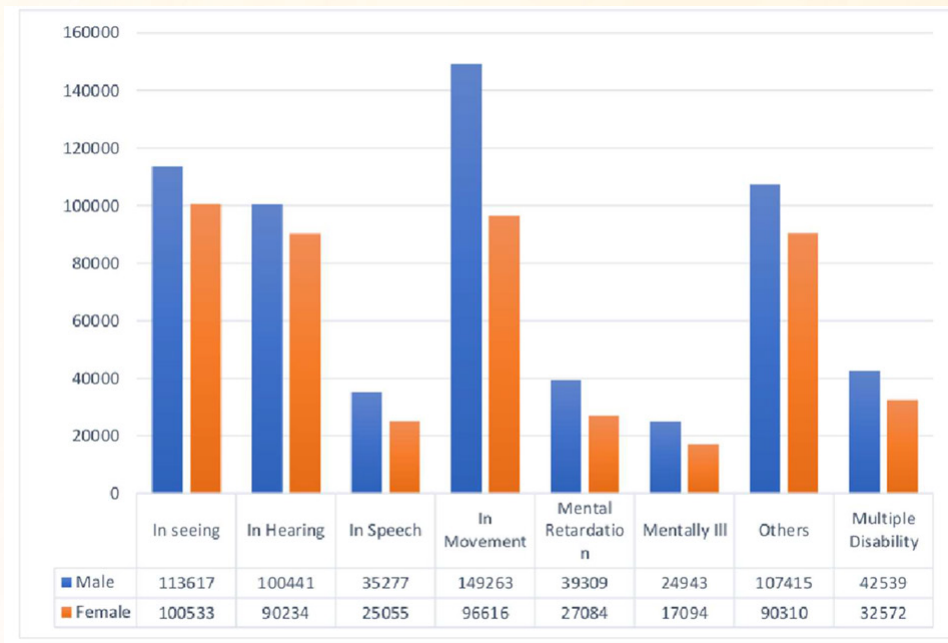
matriculated/secondary school students, and 20857 are college graduates, which shows 8.09 % of disabled women literate are graduates.

Graph-3

Gender-based literacy rates of disabled populations in Gujarat

Graph no.3 shows that nearly 686443 persons with disabilities are literate, and that 428773 disabled men are literate and that 257670 disabled women are literate.

The total number of illiterate disabled is nearly 405859, out of which 184031 are male and 221828 are female.



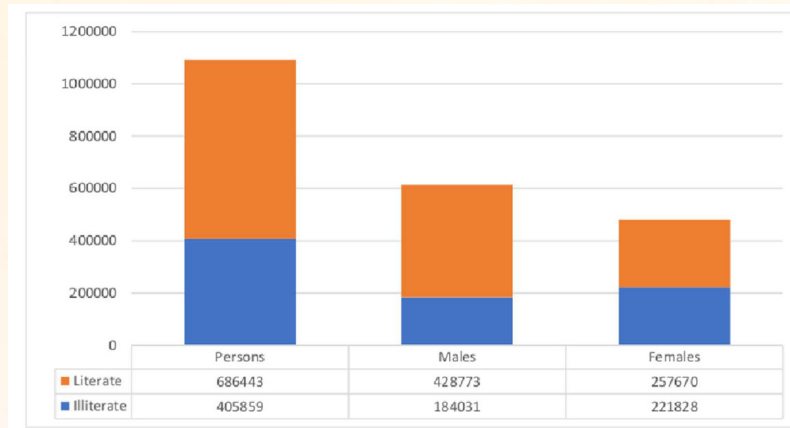
5.3 Marital Status of disabled population

Total disabled population				Marital status								
				Never married			Currendy Married			Widowed		
Age Group	Persons	Males	Females	Person	Males	Females	Persons	Males	Females	Person	Males	Females
Total	1090302	612804	479498	465890	284955	180935	508206	293134	215072	103716	27267	76449
0-14	221706	125889	95817	218080	124310	93770	3284	1445	1839	226	82	144
15-59	674686	392805	281881	237510	154202	83308	397411	223237	174174	27109	8772	18337
60+	191513	91616	99897	8142	5050	3092	105709	67476	38233	75994	18309	57685
Age not stated	4397	2494	1903	2158	1393	765	1802	976	826	387	104	283

(Source: Census of India, 2011)

Total disabled population				Marital status								
				Never married			Currently Married			Widowed		
Age Group	Persons	Males	Females	Person	Males	Females	Persons	Males	Females	Person	Males	Females
Total	1090302	612804	479498	465890	284955	180935	508206	293134	215072	103716	27267	76449
0-14	221706	125889	95817	218080	124310	93770	3284	1445	1839	226	82	144
15-59	674686	392805	281881	237510	154202	83308	397411	223237	174174	27109	8772	18337
60+	191513	91616	99897	8142	5050	3092	105709	67476	38233	75994	18309	57685
Age not stated	4397	2494	1903	2158	1393	765	1802	976	826	387	104	283

(Source: Census of India, 2011)



The total number of impaired people between the ages of 15 and 59 is 397411 currently married and 27109 widowed, while the number of disabled males is 223237 currently married and 11772 widowed, while the number of disabled females is 174174 and 18337 respectively, There are currently 105709 married disabled persons in the age group 60 and over and 75994 widowed. There are 67476 married disabled men and 18309 widowed disabled women, which represents 38233 and 57685 respectively,

Graph-4

Marital status of disabled population

In Graph 4 of the report, 47% of all disabled individuals are currently married, while 43% have never married and 10% are widowed.

Graph-5

Marital status of disabled persons in Gujarat

6. Conclusion:

Currently Gujarat has about 1.81 per cent disabled persons in the total population. An important finding of this study is that the higher movement disability and seeing disability are large percentage of disabled population in Gujarat. Gujarat ranks 11th in the number of persons with disabilities in India. In the total population, the total of 612804 male handicapped and 479498 females handicapped are found in Gujarat. Of these, Movement Disability in male (149,263) is the highest and Seeing Disability in male (113,617) is the second highest and Seeing

Disability in females (100533) is the highest and Movement Disability in females (96616) is the second highest Gujarat has more male disabilities than female disabilities, according to recent estimates. A greater academic focus is needed to address this alarming trend among Gujarati males in the near future if the state wants to bring down disability rates.

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पुर्नपाठ एकता का विघटन

डॉ० भीम राव अम्बेडकर

हिन्दुओं को एकता के विध्वंस की शिकायत करने से पूर्व उन्हें इस बारे में सुनिश्चित होना चाहिए कि जिस एकता पर वे जोर दे रहे हैं वह विद्यमान भी है या नहीं। पाकिस्तान और हिंदुस्तान के बीच क्या एकता है? जो हिंदू एकता के हामी हैं वे मुख्यतः इस तथ्य पर भरोसा करते हैं कि जिन क्षेत्रों को मुसलमान भारत से पृथक करना चाहते हैं, वे सदैव भारत का अंग रहे हैं। ऐतिहासिक दृष्टि से निश्चय ही यह सत्य है। यह क्षेत्र उस समय भारत का अंग था जब चंद्रगुप्त भारत के शासक थे, जब चीनी तीर्थयात्री ह्वेनसांग ने अपनी डायरी में यह उल्लेख किया था कि भारत पांच विभागों में विभाजित था। यदि उनकी भाषा में ही कहा जाए तो यहां पांच इंडीज थे – 1. उत्तरी भारत, 2. पश्चिमी भारत, 3. मध्य भारत, 4. पूर्वी भारत, 5. दक्षिणी भारत और इन पांचों विभागों में 80 रियासतें थीं। ह्वेनसांग के अनुसार उत्तरी भारत में पंजाब था, जिसमें कश्मीर और उसके आसपास के पहाड़ी राज्य तथा सिंध-पार का समस्त पूर्वी अफगानिस्तान शामिल था और सरस्वती नदी के पश्चिम तक के वर्तमान सिस-सतलज राज्य शामिल थे। इसी तरह उत्तरी भारत में काबुल, जलालाबाद, पेशावर, गजनी और बन्नु के जिले शामिल थे, जिन पर कपिसा के शासक का शासन था, जो हिंदू क्षत्रिय था और जिसकी राजधानी संभवतः काबुल से 27 मील दूर स्थित चारीकार थी। खास पंजाब में तक्षशिला के पर्वतीय जिले सिंहपुरा, उरासा, पुंछ और राजौरी शामिल थे जो कश्मीर के राजा के शासन में थे जबकि सारा मैदानी क्षेत्र, जिसमें मुलतान और शोरकोट शामिल थे, लाहौर के समीप बर्की अथवा संगला के शासक के अधीन थे। जिस समय ह्वेनसांग अपनी तीर्थयात्रा पर आए तब भारत की उत्तरी सीमा का उपरोक्त विस्तार था। परंतु जैसा कि प्रोफेसर टोयनबी का कथन है

"हमें ऐतिहासिक भावना के मामले में सतर्क रहना चाहिए, अर्थात् उन स्थितियों को लेकर जो कभी

विद्यमान थीं अथवा जिनके होने की कल्पना की जाती है, परंतु जो इस समय वास्तविकता नहीं रह गई हैं। उन्हें अत्यंतिक उदाहरणों द्वारा तो बड़ी आसानी से प्रस्तुत किया जा सकता है। इतालवी अखबारों ने त्रिमोली पर अधिकार को पितृभूमि को पुनः ले लेने की संज्ञा दी है, क्योंकि यह क्षेत्र कभी रोमन साम्राज्य का एक प्रांत था, और मकदूनिया के सम्पूर्ण क्षेत्र पर एक ओर यूनानी संकीर्णतावादियों का दावा रहा है, क्योंकि इसमें पेला का स्थान भी है जो ईसा पूर्व चतुर्थ शताब्दी में सिकंदर महान की स्थली था, और दूसरी ओर बलगेरियों का दावा है, क्योंकि ठीक दूसरी ओर के कोने में ओचरिदा स्थित है, जो दसवीं शताब्दी में बलगेरियाई जारशाही की राजधानी रहा, हालांकि समय के प्रवाह ने परवर्ती परंपरा को उतना ही गहरे दफना दिया है जितना कि 'इमाथियन विजेता' की उपलब्धियों को, जिन पर यूनानी राष्ट्रवादी इतना दृढ़ आग्रह करते हैं।' यही तर्क यहां भी लागू होता है। यहां भी कभी विद्यमान रही उन स्थितियों के आधार पर तर्क प्रस्तुत किए जाते हैं जो अब वास्तविकता नहीं रह गई हैं और जिनमें बाद के उन तथ्यों पर ध्यान नहीं दिया जाता जिन्हें इतिहास ने ह्वेनसांग के वापस लौटने के बाद के वस्तुतः एक हजार वर्षों के दौरान प्रस्तुत किया है।

यह सत्य है कि जब वेनसांग आए थे तो न सिर्फ पंजाब, अपितु आज का अफगानिस्तान भी भारत का भाग था और इसके अलावा पंजाब और अफगानिस्तान के निवासी वैदिक अथवा बौद्ध धर्म के अनुयायी थे। परंतु ह्वेनसांग के भारत से लौटने के बाद से क्या हुआ?

सर्वाधिक महत्वपूर्ण बात यह है कि पश्चिमोत्तर से भारत पर मुस्लिम आक्रांताओं ने हमला किया। भारत पर पहला मुस्लिम आक्रमण अरबों ने किया, जिसका नेतृत्व मुहम्मद बिन कासिम ने किया था। यह हमला सन 711 में हुआ था और उसने सिंध पर विजय प्राप्त की। इस पहले मुस्लिम आक्रमण का परिणाम देश पर

स्थाई अधिकार के रूप में सामने नहीं आया, क्योंकि बगदाद के खलीफा को, जिसके आदेश और आह्वान पर यह हमला हुआ था, नौवीं शताब्दी के मध्य में सिंध के इस सुदूर प्रांत से अपना प्रत्यक्ष नियंत्रण हटाने पर बाध्य होना पड़ा था। इसके बाद सन् 1001 में गजनी के मुहम्मद के भीषण आक्रमणों का तांता लग गया। मुहम्मद की मृत्यु 1030 ई. में हो गई। परन्तु तीस वर्ष की अल्पावधि में ही उसने भारत पर सत्रह बार आक्रमण किया था। उसके बाद 1173 ई. में मुहम्मद गोरी ने भारत पर आक्रमण किया। वह 1206 ई. में मारा गया। तीस साल तक गजनी के मुहम्मद ने भारत को रौंदा और तीस साल तक उसी तरह मुहम्मद गोरी भी इस देश को रौंदता रहा। उसके बाद चंगेज खान के मंगोल झुंडों ने धावे बोले। ये आक्रांता 1221 ई. में आए। तब उन्होंने भारत की सीमाओं पर ही आक्रमण किए, भीतर प्रविष्ट नहीं हुए। लेकिन बीस वर्ष बाद उन्होंने लाहौर पर धावा बोला और उसे लूटा। उन हमलों में से सर्वाधिक भीषण हमला 1398 में तैमूर लंग के नेतृत्व में हुआ। उसके बाद बाबर के रूप में एक नया आक्रांता उभरा, जिसने 1526 ई. में भारत पर हमला किया। दो और आक्रमण भी हुए। 1738 ई. में आक्रांता नादिर शाह के नेतृत्व में पंजाब पर चढ़ दौड़े। उनका यह आक्रमण नदी में आई भीषण बाढ़ या फिर सागर के रौद्र रूप जैसा था। उसके बाद 1761 ई. में अहमदशाह अब्दाली ने भारत पर हमला किया। उसने पानीपत में मराठों की सेनाओं को पराजित किया और हिंदुओं द्वारा मुस्लिम आक्रांताओं के हाथों गंवाए गए आधार को पुनः प्राप्त करने के लिए होने वाले प्रयासों की हमेशा के लिए कमर तोड़ दी।

मुस्लिम हमले मात्र लूटमार अथवा विजय की आकांक्षा से प्रेरित होकर ही नहीं किए गए थे। इनके पीछे एक और उद्देश्य भी था। मुहम्मद बिन कासिम ने सिंध पर जो हमला किया, रसका स्वरूप दंडात्मक भी था। वह सिंध सम्राट दाहिर को सजा देने के लिए हुआ था, जिसने देवल में, जोकि सिंध का एक बंदरगाह था, पकड़े गए एक अरब जहाज को मुक्त करने से इन्कार कर दिया था। परंतु इस बात में भी कोई संदेह नहीं कि भारत में मूर्ति-पूजा और हिंदुओं के बहुदेववाद पर प्रहार कर यहां इस्लाम की स्थापना भी इन हमलों का एक उद्देश्य था। हज्जाज को भेजे गए एक पत्र में मोहम्मद बिन कासिम का यह उल्लेख है।

राजा दाहिर के भतीजे, उसके योद्धाओं और प्रमुख अधिकारियों को ठिकाने लगा दिया गया है और मूर्तिपूजकों को या तो इस्लाम में दीक्षित कर दिया गया है अथवा उन्हें तबाह कर दिया गया है। मूर्तियोंवाले मदिरो के स्थान पर मस्जिद और अन्य इबादत-स्थल बनाए गए हैं, कुतबाह पढ़ी जाती है। अजान दी जाती है, ताकि निर्धारित घंटों पर इबादत हो सके। तकबीर और अल्लाह-हो-अकबर की सदाएं हर सवेरे-शाम गूंजती हैं।

यह पत्र राजा के सिर के साथ भेजा गया था। इसे प्राप्त करने के बाद हज्जाज ने अपने सेनापति को निम्नलिखित पत्र भेजा था:

"इसके अलावा तुम सभी बड़े और छोटे को सुरक्षा दो। शत्रु और मित्र में भेद न करो। खुदा का कथन है कि मूर्तिपूजकों से कोई रियायत न बरतो, अपितु उनके गले काट दो।" यह समझ लो कि यही महान अल्लाह का आदेश है। तुम्हें अभयदान देने के लिए तुरंत तैयार नहीं होना चाहिए, क्योंकि इससे तुम्हारा काम और बढ़ जाएगा। इसके बाद उन दुश्मनों के अलावा जो सामान्य सैनिक हैं किसी को न बख्शो। गजनी के मुहम्मद ने भी भारत पर अपने अनेक हमलों को जिहाद छेड़ने की संज्ञा दी थी। मुहम्मद के इतिहासकार अल उतबी ने उसके हमलों के बारे में लिखा था।

"उसने मंदिरों में मूर्तियों को तोड़ा और इस्लाम की स्थापना की। उसने शहरों पर कब्जा किया, नापाक कमीनों को मार डाला, मूर्ति-पूजकों को तबाह किया और मुसलमानों को गौरवान्वित किया। तदुपरांत वह घर लौटा और इस्लाम के लिए की गई विजयों का ब्यौरा दिया और यह संकल्प व्यक्त किया कि वह हर वर्व हिंद के खिलाफ जिहाद करेगा। मुहम्मद गोरी भी भारत पर हमलों में उसी धार्मिक जोश से प्रभावित था। इतिहासकार हसन निजामी ने उसके क्रियाकलाप का विवरण इन शब्दों में दिया।

उन्होंने अपनी तलवार से हिंद को कुफ्र की गंदगी से साफ किया और पाप से मुक्त किया तथा उस सारे मुल्क को बहुदेववाद के कंटक से स्वच्छ किया और मूर्तिपूजा की अपवित्रता से पाक किया, और अपने शाही शौर्य और साहस का प्रदर्शन करते हुए एक भी मंदिर को खड़ा नहीं रहने दिया। तैमूर ने अपने संस्मरण में स्पष्ट किया है कि उसे किन



कारणों ने भारत पर हमला करने को प्रेरित किया। वह कहता है।

हिंदुस्तान पर हमलों का मेरा मकसद काफिरों के खिलाफ अभियान चलाना और मुहम्मद के आदेशानुसार उन्हें सच्चे दीन में धर्मांतरित करना है। (उस पर और उसके परिवार पर अल्लाह की दया और रहमत हो) उस धरती को मिथ्या आस्था और बहुदेववाद से पवित्र करना है। तथा मंदिरों और मूर्तियों का विध्वंस करना है, हम गाजी और मुजाहिद होंगे और अल्लाह की नजर में सहयोगी और सैनिक सिद्ध होंगे।' भारत पर मुसलमानों के हमले भारत के विरुद्ध हुए आक्रमण तो थे ही, साथ ही वे मुसलमानों में पारस्परिक युद्ध भी थे। यह तथ्य इसलिए छिपा रहा है क्योंकि सभी आक्रांताओं को बिना किसी भेदभाव के सामूहिक तौर पर मुसलमान करार दिया जाता है। परंतु तथ्य यह है कि वे तातार, अफगान और मंगोल थे। मुहम्मद गजनी तातार था। मुहम्मद गौरी अफगानी था। तैमूर मंगोल था। बाबर तातार था, जबकि नादिरशाह और अहमदशाह अब्दाली अफगानी थे। अफगानों का भारत पर हमला करने के पीछे एक मकसद तातारों को तबाह करना था और मंगोल हमलावर तातारों व अफगानों को तबाह करना चाहते थे। उनका परस्पर प्रेम की भावना से संपुष्ट हुआ कोई ऐसा परिवार नहीं था जो मुस्लिम भाईचारे की भावना से एकजट हो गया हो। वे एक-दूसरे के जानी दुश्मन थे और उनके युद्धों का मकसद एक दूसरे का सफाया करना भी था। मगर जिस बात को दिमाग में रखना महत्वपूर्ण है वह यह है कि अपने इन सभी विवादों और संघर्षों के बावजूद वे सभी इस एक सामूहिक उद्देश्य से प्रेरित थे – हिंदू धर्म का विध्वंस।

भारत पर आक्रमण करनेवाले मुसलमानों ने जो तरीके अपनाए, वे भी उनके हमलों के मकसद को देखते हुए भारत के बाद के इतिहास की दृष्टि से कम महत्वपूर्ण नहीं हैं।

मुहम्मद बिन कासिम ने मजहबी जोश के साथ जो पहला कार्य किया, वह था देवल नगर पर अधिकार कर लेने के बाद वहां के ब्राह्मणों का खतना कराना। परंतु जब उसे यह पता लगा कि वे इस तरह के धर्मांतरण पर आपत्ति उठा रहे हैं तो उसने सत्रह वर्ष से अधिक की आयु वाले सभी लोगों का वध करा

दिया और यह आदेश दिया कि अन्य सभी को, जिनमें औरतें और बच्चे भी शामिल थे, गुलाम बना लिया जाए। हिंदुओं के मंदिरों को लूटा गया और लूट की इस प्रचुर संपदा के पांचवें हिस्से को अलग करके, जोकि सरकार का कानूनी हिस्सा था, शेष सारी संपदा सैनिकों में बराबर-बराबर बांट दी गई।

मुहम्मद गजनी ने प्रारंभ से ही ऐसी योजनाएं अपनाईं जिनसे हिंदुओं के हृदय में आतंक व्याप्त हो सके। सन् 1001 में राजा जयपाल को पराजित करने के बाद मुहम्मद ने आदेश दिया कि जयपाल को "सड़कों पर घुमाया जाए ताकि उसके बेटे और सरदार उसे लज्जा, कैद और अपमान की उस हालत में देख सकें और देश भर के काफिरों के दिलों में इस्लाम की ताकत का खौफ बैठ जाए।

काफिरों का संहार एक ऐसी बात थी जिसमें मुहम्मद को खास तौर के आनंद का अनुभव होता था। 1019 ई. में चांदराय पर किए गए एक हमले में अनेक काफिरों को मौत के घाट उतार दिया गया अथवा बंदी बना लिया गया और मुसलमानों ने लूट के माल को तब तक कोई महत्व नहीं दिया जब तक कि उन्होंने स्वयं को काफिरों तथा सूर्य और चंद्रमा के उपासकों के संहार से तृप्त नहीं कर लिया। इतिहासकार ने बड़े सरल भाव से यह भी लिखा है कि हिंदू सेना के हाथी मर्तियों को छोड़कर स्वतः मुहम्मद के पास आ गए और उन्होंने इस्लाम धर्म की सेवा करना ही श्रेयस्कर समझा। हिंदुओं की बार-बार हत्याओं से, मुहम्मद बख्तियार खिलजी की बिहार-विजय की तरह, हिंदुओं की अपनी संस्कृति को गहरा आघात लगा। तबकाते-नसीरी से हमें यह जानकारी मिलती है कि जब उसने नुदिया (बिहार) पर कब्जा कर लिया तो क्या हुआरू

विजेताओं ने भयंकर लूटपाट की। वहां के अधिकांश निवासी ब्राह्मण थे, जिनके सिर मुंडे हुए थे। उन्हें मौत के घाट उतार दिया गया। बहुत भारी संख्या में पुस्तकें प्राप्त हुईं, परन्तु उनके अर्थ स्पष्ट करने वाला कोई था ही नहीं, क्योंकि सभी लोग मार डाले गए थे, जबकि सारा किला और नगर ही अध्ययन का एक स्थान था। इस मुद्दे पर उपलब्ध साक्ष्य का सारांश प्रस्तुत करते हुए डॉ० टाइटस ने कहा है। मंदिरों के विध्वंस और प्रतिमाओं को अपवित्र किए जाने के पर्याप्त

साक्ष्य उपलब्ध है। हम देख चुके हैं कि मुहम्मद बिन कासिम ने सिंध में बड़े योजनाबद्ध ढंग से विनाश की अपनी योजना को क्रियान्वित किया था। परंतु उसने राजस्व के मकसद से मुलतान के एक सुप्रसिद्ध मंदिर को छोड़ दिया था, क्योंकि यह मंदिर तीर्थयात्रियों का आवास स्थल था, जो प्रतिमा के सामने काफी बड़ी मात्रा में उपहार समर्पित मिन्हाज-अस-सिराज यह भी बताता है कि मुहम्मद किस तरह से एक हजार मंदिरों तथा सोमनाथ के मंदिरों को विध्वस्त करने वाले तथा उसकी प्रतिमा को ले जाने का साहसिक कृत्य करने वाले के रूप में व्यापक तौर पर चर्चित हो गया था। उसका यह भी दावा था कि मूर्ति के चार टुकड़े कर दिए गए थे। उसका एक भाग गजनी की जामी मस्जिद में जमा कराया गया, एक को उसने शाही महल के प्रवेश द्वार पर रखा और तीसरा भाग मक्का तथा चौथा मदीना भेजा गया। लेन पूल ने कहा है कि मुहम्मद गजनी ने, जिसने यह संकल्प किया था कि वह हिंदुस्तान के काफिरों के खिलाफ हर वर्ष जिहाद करेगा और तब तक अपना मूर्ति-मंजन-अभियान चलाता रहेगा जब तक कि सोमनाथ का मंदिर अक्षत है। इसी विशेष उद्देश्य से उसने अपनी जीवन-लीला समाप्त होने से कुछ ही समय पूर्व मुलतान के अन्हलवाड़ा में तटवर्ती क्षेत्र के रेगिस्तान को पार कर भयानक चढ़ाई की और वह तब तक युद्ध करता रहा, जब तक कि उसने अंततोगत्वा इस सुप्रसिद्ध मंदिर को ध्वस्त नहीं कर दिया।

वहां लाखों तीर्थ-यात्री एकत्रित होते थे। एक हजार ब्राह्मण इस देवालय में पूजन-वंदन करते थे और इसके कोष की रक्षा करते थे, सैकड़ों नर्तक और गायक उसके द्वार पर अपनी कला का प्रदर्शन करते थे। इसके अंदर सुप्रसिद्ध लिंग था, जो पाषाण का एक स्थूल स्तंभ था। उस पर हीरे-जवाहरात जड़े हुए थे और वह रत्नजड़ित दीपाधार से सजे-धजे थे और इस देवालय को महिमामंडित करते थे। उसकी प्राचीरों पर काफिर ब्राह्मणों के झुंड एकत्रित रहते थे। जो उन विदेशी काफिरों के निष्फल दर्प का परिहास करते थे जिनके बारे में वे सोचते थे कि उन्हें सोमनाथ भगवान सुनिश्चित रूप से लील लेंगे। विदेशी निर्वैत दीवारों पर चढ़ गए। भगवान अपने सेवकों की प्रार्थनाओं पर भी मूक बना रहा। पचास हजार हिंदुओं ने अपनी आस्था के कारण यातना भोगी

और इस पवित्र देवालय को सच्ची आस्था वालों ने सोल्लास लूटा। वह महान पाषाण ध्वस्त कर दिया गया और उसके खंडों को विजेता के महल की शोभा बढ़ाने के लिए ले जाया गया। मंदिर के द्वार गजनी में लगाए गए और मूर्तिभंजकों को दस लाख

पौंड मूल्य का खजाना पुरस्कार तुल्य प्राप्त हुआ। गजनी के मुहम्मद द्वारा किया गया कृत्य एक पावन परंपरा बन गया और उसके बाद के आक्रांताओं ने उसका निष्ठापूर्वक पालन किया। डॉ० टाइटस के शब्दों में: मोहम्मद गोरी ने, जो मुहम्मद गजनी का एक उत्साही उत्तराधिकारी था, अजमेर की विजय के दौरान मूर्तियों वाले मंदिरों के स्तंभों और आधारों को ध्वस्त किया और उनके स्थान पर मस्जिदों का निर्माण करवाया और मकतब बनवाए और इस्लाम के नियम और कानून की प्रथाएं तैयार कर उन्हें स्थापित किया। दिल्ली नगर और उसके आसपास के क्षेत्रों को मूर्तियों और मूर्तिपूजकों से मुक्त कर दिया गया और देव-प्रतिमाओं के स्थान पर एक खुदा की इबादत करने वालों ने मस्जिद खड़ी कर दी।

कहा जाता है कि कुतुबुद्दीन ऐबक ने भी लगभग एक हजार मंदिरों को ध्वस्त कर उनके स्थान पर मस्जिदें खड़ी की थी। उसी लेखक का कहना है कि उसने जामा मस्जिद दिल्ली का निर्माण कराया और उसे उन मंदिरों से प्राप्त हुए स्वर्ण तथा पाषाणों से सजाया जिन्हें हाथियों द्वारा तोड़ा गया था। उसे उन शिलालेखों से भर दिया जिनमें कुरान के आदेश उत्कीर्ण थे। दिल्ली की इस मस्जिद के पूर्वी प्रवेश द्वार पर जो शिलालेख अंकित है, उनमें यह बताया गया है कि इस मस्जिद के निर्माण में 27 मंदिरों की सामग्री का उपयोग किया गया था।

जामा मस्जिद की कुतुबुद्दीन ऐबक द्वारा बनाई गई एक मीनार के मुकाबले अलाउद्दीन ने दूसरी मीनार बनाने के जोश में, अमीर खुसरो के कथनानुसार, पहाड़ियों से खोदकर पत्थर ही नहीं निकाले, अपितु सामग्री के लिए काफिरों के मंदिरों को भी तोड़ा। दक्षिण भारत की अपनी विजयों में भी अलाउद्दीन ने मंदिरों को उसी तरह तोड़ा जिस तरह उत्तर में उसके पूर्ववर्तियों ने तोड़ा था।

सुलतान फिरोज शाह ने अपने फतुहात में विस्तृत वर्णन करके यह बताया है कि उसने उन हिंदुओं के साथ किस तरह का व्यवहार किया जिन्होंने नए मंदिरों



के बनाने का साहस किया था। जब उन्होंने पैगंबर के कानून के विरुद्ध जिसमें यह घोषित किया गया कि यह सब सहन नहीं किया जाना चाहिए, शहर (दिल्ली) और उसके पास-पड़ोस में ऐसा किया, तो मैंने खुदाई निर्देशों के तहत इन इमारतों को ध्वस्त कर दिया। मैंने काफिरों के उन नेताओं को मार डाला और अन्य को कोड़े लगाकर तब तक दंडित किया कि जब तक उस बुराई का पूरी तरह उन्मूलन नहीं हो गया जिसमें काफिर और मूर्तिपूजक मूर्तियों की पूजा करते थे। खुदा के रहमोकरम से अब मुसलमान सच्चे खुदा के प्रति अपनी आस्थाओं का परिपालन करते हमने पढ़ा है कि शाहजहां के शासनकाल में भी उन मंदिरों को तोड़ा गया था जिन्हें हिंदुओं ने पुनः बनाना शुरू किया था और इस तरह हिंदुओं की धर्मपरायणता पर इस सीधे हमले का उल्लेख 'बादशाह नामा' में भी सगौरव दर्ज इतिहासकार कहता है कि बादशाह का ध्यान इस ओर दिलाया गया कि पिछले (अकबर के) शासन के दौरान अनेक मंदिरों का, जिनमें मूर्तियां हैं, बनारस में निर्माण शुरू हो गया था, जो अपूर्ण है। वह कुफ्र का सुदृढ़ केंद्र है। काफिर अब उन्हें पूरा करने के इच्छुक है। बादशाह सलामत जो दीन के रक्षक हैं, ने आदेश दिया कि बनारस और उनकी पूरी सल्तनत में हर जगह उन मंदिरों को गिरा दिया जाए, जिनका निर्माण शुरू हुआ था। इलाहाबाद प्रांत से यह सूचना मिली है कि बनारस जिले में 76 मंदिरों को गिराया गया है। मूर्तिपूजा को उखाड़ फेंकने का अंतिम प्रयास औरंगजेब के जिम्मे आया। श्मा आथिर-ए-आलमगीरी में हिंदू शिक्षा के उन्मूलन और उसके द्वारा मंदिरों का विध्वंस किए जाने का विस्तृत विवरण निम्नलिखित शब्दों में किया गया है: अप्रैल 1669 ई. में औरंगजेब को यह ज्ञात हुआ कि थट्टा, मुलतान और बनारस प्रांतों, खासतौर पर अंतिम में, मूर्ख ब्राह्मण अपनी पाठशालाओं में तुच्छ पुस्तकों की व्याख्याएं करते हैं और शिष्य, जिनमें मुसलमान और हिंदू दोनों हैं, लंबी दूरी तय कर वहां जाते हैं।

परिणामतः दीन के निगहबान ने सभी प्रांतों के सूबेदारों को यह आदेश दिया कि वे काफिरों की पाठशालाओं और मंदिरों को निस्सकोच गिरवा दें,

और उन्हें यह काम भी सौंपा गया कि वे मूर्ति-पूजा की शिखा और चलन को पूरी तरह रोक दें..... बाद में दीन के रक्षक को यह बताया गया कि सरकारी अधिकारियों ने बनारस के विश्वनाथ मंदिर को ध्वस्त कर दिया है।' जैसा कि डॉ० टाइटस ने ही लिखा है।

मुहम्मद और तैमूर जैसे आक्रांता बलात् धर्मांतरण के बजाए आर्थिक भावना अर्थात् लूट से धन-संग्रह, बंदी बनाए लोगों को गुलाम बनाने और धर्मांतरण की तलवार से काफिरों को दोजख भेजने पर ही ज्यादा ध्यान देते थे। परंतु जब शासक स्थाई तौर पर बस गए तो धर्मांतरितों का विश्वास पाना सर्वोच्च महत्व बन गया। राज्य की नीति का यह एक भाग ही बन गया कि सारे देश का धर्म इस्लाम ही बनाया जाए।

कुतुबुद्दीन ऐबक ने, जिसकी ख्याति मंदिरों को तोड़ने में लगभग उतनी ही थी जितनी बारहवीं शताब्दी के अंतिम चरण और तेरहवीं शताब्दी के प्रारंभ में मुहम्मद की थी, धर्मांतरण के लिए ताकत का सहारा भी अक्सर लिया था। एक दृष्टांत दिया जा सकता हैरु जब वह 1194 ई. में कोइल (अलीगढ़) पहुंचा तो तोपखाने में जो लोग चतुर और निपुण थे, उन्हें इस्लाम में दीक्षित कर लिया गया और अन्य लोगों को तलवार से मौत के घाट उतार दिया गया।

धर्मांतरण के लिए बाध्य करने हेतु जो कठोर कदम उठाए गए, वे अनेकानेक थे। एक हृदय विदारक मामले का उल्लेख फिरोजशाह के शासन-काल (1351-1388) का है। दिल्ली के एक ब्राह्मण पर आरोप लगाया गया कि वह अपने घर में मूर्तियों की पूजा करता है और यह भी कि वह मुस्लिम महिलाओं को काफिर बना रहा है। उसको पकड़ा गया और उसका मामला न्यायाधीशों, चिकित्सकों, बुजुर्गों और वकीलों के समक्ष पेश किया गया। उन्होंने उत्तर दिया कि कानून के प्रावधान सुस्पष्ट है। ब्राह्मण या तो मुसलमान बन जाए अथवा उसे जला दिया जाए। उसे सच्चे दीन से अवगत करा दिया गया और सही राह भी उसे दिखा दी गई, परंतु उसने उसे मानने से इंकार कर दिया। परिणामस्वरूप सुलतान के आदेश से उसे जला दिया गया और टिप्पणीकार ने लिखा है कि - कानून और इंसाफ के प्रति सुलतान के गहन

लगाव को देखो कि किस तरह से वह उसके आदेशों से तनिक भी नहीं डिगते।। मुहम्मद ने मंदिर ही नहीं तोड़े, अपितु जिन हिंदुओं पर उन्होंने विजय प्राप्त की थी, उन्हें गुलाम बनाना भी उन्होंने अपनी नीति बना ली। डॉ० टाइटस के शब्दों में: इस्लाम के भारत से संपर्क में आने की प्रारंभिक अवधि में ही न केवल काफिरों का संहार और उनके मंदिरों का विध्वंस ही किया गया, अपितु, जैसा कि हमने देखा है, पराजितों में से अनेक गुलाम भी बना लिए गए। इन आक्रमणों में लूट के माल का सरदारों और सामान्य सैनिकों के बीच बंटवारा एक विशेष आकर्षण था। प्रतीत होता है कि मुहम्मद ने काफिरों के संहार, उनके मंदिरों और पुजारियों की संपदा की लूट को अपने हमलों का एक विशेष उद्देश्य बना लिया था। बताया जाता है कि अपने पहले हमले में ही वह बहुत अधिक लूट का माल और आघे लाख सुंदर पुरुष और महिला हिंदुओं को गुलाम बनाकर गजनी ले गया था। 1070 ई. में जब मुहम्मद ने कन्नौज पर कब्जा किया तो उसने इतनी अधिक संपदा लूटी और लोगों को बंदी बनाया कि उनकी गणना करने वालों की उंगलियां थक गई। 1019 ई. के आक्रमण के बाद गजनी और मध्य एशिया में भारतीय गुलाम कितने आम हो गए थे, उसका विवरण करते हुए उस समय का एक इतिहासकार कहता है।

बंदियों की संख्या का अनुमान इस तथ्य से लगाया जा सकता है कि हर गुलाम को दो से दस दिरहम तक बेचा गया। बाद में ये गजनी ले जाए गए और सुदूर नगरों से व्यापारी उन्हें खरीदने आए और गोरे और काले, घनी और निर्धन एक सांझी दासता में जकड़ लिए गए।

सन् 1202 ई. में जब कुतुबुद्दीन ने कालिंजर पर अधिकार कर लिया मंदिरों को मस्जिदों में बदलने और मूर्तिपूजा का नाम निशान मिटाने के बाद पचास हजार लोग गुलामी के बंधन में जकड़े गए और मैदान हिंदुओं से ठसाठस भरा काला सा दिखाई देने लगा।

जिहाद में जो हिंदू पकड़े जाते, गुलामी ही उनका प्रारब्ध बनती थी। परंतु जब युद्ध नहीं होता था तब भी हिंदुओं का अपमान मुस्लिम आक्रांताओं द्वारा अपनाए गए हथकंडों का कम महत्वपूर्ण भाग नहीं

था। अलाउद्दीन के शासनकाल में चौदहवीं शताब्दी के प्रारंभ में कुछ इलाकों में हिंदुओं ने सुल्तान को काफी परेशान किया था। अतएव उसने उन पर ऐसे कर लगाने का फैसला किया जिससे वे पुनः विद्रोह करने का साहस न कर सकें।

हिंदुओं को इस स्थिति में ला दिया गया था कि वे सवारी के लिए घोड़ा नहीं रख सकें, न ही अच्छे वस्त्र पहन सकें और न ही जीवन का कोई और सुखोपयोग कर सकें। जजिया कर लगाए जाने के बारे में डा. टाइटस कहते हैं:

हिंदुओं द्वारा जजिया का चुकाया जाना मुसलमानों, बादशाहों और शाहों के शासनकाल में भारत के विभिन्न भागों में न्यूनाधिक नियमित ही था, हालांकि कानून अक्सर मात्र सिद्धांततः, ही लागू था, क्योंकि यह बादशाह की अपनी मांगों को लागू कराने की योग्यता पर ही पूर्णतः निर्भर था। परंतु अंततः यह महान अकबर के शासनकाल के नौवें वर्ष (1665 ई.) में सारे मुगल साम्राज्य में हटा दिया गया, जबकि इससे पहले यह आठ शताब्दियों से भी अधिक तक भारत में मुस्लिम शासन का एक बुनियादी हिस्सा बना रहा था। लेन पूल कहते हैं कि:

हिंदुओं पर कर उनकी भूमि के उत्पादन में से आधा तक था और उन्हें अपनी सभी मैंसों, बकरियों और अन्य दुधारू पशुओं पर भी कर चुकाना पड़ता था। धनी और निर्धन सभी को प्रति एकड़ और प्रति पशु की दर से समान रूप से कर चुकाना होता था। कोई भी संग्राहक या अधिकारी, जो रिश्वत लेता था, उसे सरसरी तौर पर सुनवाई के बाद बर्खास्त कर दिया जाता था और उसकी बेंतों, चिमटो से पिटाई की जाती थी और मुश्के और हथकड़ियां-बेंड़ियां डालने जैसी कड़ी सजा दी जाती थी। नए नियमों को कड़ाई से लागू किया जाता था, ताकि एक राजस्व अधिकारी बीस विशिष्ट हिंदुओं को शिकजे में कसकर उन पर घूसों से प्रहार करें और वसूली कर सकें। किसी भी हिंदू घर में सोना अथवा चादी तो क्या, सुपारी, जिसे किसी खुशी के अवसर पर पेश किया जाता है, तक भी दिखाई नहीं देती थीय और असहाय बना दिए गए देशज अधिकारियों की पत्नियों को मुस्लिम परिवारों में नौकरी करके गुजारा करना पड़ता था। राजस्व



अधिकारियों को प्लेग से भी ज्यादा घातक माना जाने लगा था और किसी का भी सरकारी लिपिक बनाया जाना मौत से भी बुरा माना जाता था, यहां तक कि कोई हिंदू ऐसे किसी व्यक्ति से अपनी बेटी का विवाह नहीं करना चाहता था। उस समय के इतिहासकार का कथन है कि ये राजाज्ञाएं इतनी कठोरता से लागू की गई थीं कि चौकीदार, खूट और मुकदिम घोड़े की सवारी नहीं कर सकते थे, हथियार नहीं रख सकते थे, न ही अच्छे कपड़े पहन सकते थे और पान भी नहीं चबा सकते थे.... कोई भी हिंदू अपना सिर नहीं उठा सकता था.... वसूली करने के लिए घूसे मारा जाना, माल भत्ता जप्त किया जाना, कैद और बेड़िया डाले जाने आदि सभी तरीके अपनाए जाते थे। यह सब कुछ सनक अथवा नैतिक विकृति मात्र का ही परिणाम नहीं था। जो कुछ किया जाता था, वह व्यापक तौर पर इस्लाम के रहनुमाओं की हाकिमों के रूप में सोच के अनुरूप होता था। सुलतान अलाउद्दीन ने मुस्लिम कानून के अंतर्गत हिंदुओं की स्थिति के बारे में काजी से सवाल किया तो काजी ने इन्हीं विचारों को भली भांति स्पष्ट किया था। उसने कहा था:

उन्हें खिराज (कर) अंदा करने वाला कहा जाता है, और जब राजस्व अधिकारी उनसे चांदी मांगे तो उन्हें बिना सवाल उठाए अति विनम्रता और आदर व्यक्त करते हुए सोना देना चाहिए। यदि अधिकारी उनके मह में मैला फेंके तो उन्हें संकोच किए बिना अपना मुख खोलकर उसे ले लेना चाहिए....! मुह में मैला फेंके जाने और इस विनम्र अदायगी से धर्म की अपेक्षित अधीनता ही व्यक्त होती है। इस्लाम का गरिमागान एक कर्तव्य है और दीन के प्रति अनादर दंभ है। खुदा उनसे नफरत करता है और उसका कथन है कि उन्हें दासता में रखो। हिंदुओं को अपमानित करना खासतौर पर एक मजहबी फर्ज है, क्योंकि वे पैगंबर के सर्वाधिक कट्टर दुश्मन हैं और क्यों कि पैगंबर ने हमें उनका कत्ल करने, उन्हें लूटने और गुलाम बनाने का आदेश यह कहते हुए दिया है— उन्हें इस्लाम में

दीक्षित करो अथवा मार डालो और उन्हें गुलाम बनाओ और उनकी धन-संपदा को नष्ट कर दो। किसी अन्य धर्माचार्य ने नहीं, अपितु महान धर्माचार्य (हनीफ) ने जिसकी राह के हम अनुगामी हैं, हिंदुओं पर जजिया लगाए जाने की इजाजत दी है, अन्य पंथों के धर्माचार्य भी किसी अन्य विकल्प की नहीं अपितु 'मौत या इस्लाम' की ही अनुमति देते हैं।' मुहम्मद गजनी के आने और अहमदशाह अब्दाली की वापसी के बीच जो 762 वर्षों की अवधि व्यतीत हुई उसकी यही कहानी है।

हिंदुओं को यह कहने का हक कहां तक है कि उत्तरी भारत आर्यवर्त का भाग है? हिंदुओं को यह कहने का कितना अधिकार है कि चूंकि एक बार यह क्षेत्र उनका था, अतएव हमेशा ही भारत का अविभाज्य अंग रहना चाहिए? जो लोग पृथकता का विरोध करते हैं और अफगानिस्तान सहित उत्तरी भारत जो कभी भारत का भाग था और उस क्षेत्र के लोग बौद्ध अथवा हिंदू थे इस प्राचीन तथ्य से उद्भूत ऐतिहासिक भावना पर बल देते हैं, उनसे यह पूछा ही जाना चाहिए कि क्या 762 वर्षों से अनवरत मुस्लिम आक्रमणों की घटनाओं को, जिस उद्देश्य से वे किए गए थे और अपने मकसद को पूरा करने के लिए इन आक्राताओं ने जो हथकंडे अपनाए थे, क्या उन्हें महत्वहीन मान लिया जाए?

इन आक्रमणों की जो अन्य परिणतियां हुईं, उनके अलावा भी मेरी राय में उन उत्तरी क्षेत्रों की संस्कृति और स्वरूप में बहुत ठोस बदलाव आया है जिसे अब पाकिस्तान में शामिल करना प्रस्तावित है। स्थिति यह है कि इस क्षेत्र और शेष भारत के बीच एकता तो है ही नहीं, अपितु दोनों के मध्य वास्तविक विद्वेष एक तथ्य बन गया है।

इन आक्रमणों की पहली परिणति उत्तरी भारत और शेष भारत की एकता का विखंडन थी। मुहम्मद गजनी ने उत्तरी भारत की अपनी विजय के बाद इसे शेष भारत से अलग कर दिया और इस पर गजनी ने

शासन किया। जब एक विजेता के तौर पर मोहम्मद गोरी सामने आया तो उसने इसे पुनः भारत में मिला दिया और इस पर पहले लाहौर से और फिर दिल्ली से शासन किया। अकबर के भाई हाकिम ने काबुल और कंधार को भारत से पृथक किया। अकबर ने उसे पुनः उत्तरी भारत में मिला दिया। सन् 1738 में नादिरशाह ने इन्हें पुनः अलग कर दिया और यदि सिखों के उत्थान ने अवरोध पेश नहीं किया होता तो समूचा उत्तरी भारत ही भारत से कट गया होता। अतएव उत्तरी भारत एक रेलगाड़ी में लगे डिब्बे जैसा रहा है, जिसे संचालन की परिस्थितियों के अनुसार जोड़ा या सलग किया जा सकता है। यदि सादृश्य ही अपेक्षित हो तो अलसास लौरेन का उदाहरण दिया जा सकता है। अलसास लौरेन मूलतः जर्मनी का एक भाग था।

जैसे कि शेष स्विट्जरलैंड और निचले देश थे। उसकी यही स्थिति 1680 ई. तक बनी रही, जब उसे फ्रांस ने ले लिया और फ्रांसिसी क्षेत्र में विलीन कर लिया। 1871 तक यह फ्रांस का भाग रहा। उसी वर्ष इसे जर्मनी ने अलग कर अपने क्षेत्र का एक हिस्सा बनाया। 1918 ई. में वह फिर जर्मनी से अलग होकर फ्रांस का हिस्सा बना और 1940 ई. में फिर जर्मनी का भाग बना दिया गया।

आक्रांताओं ने जो हथकंडे अपनाए थे, वे अपने पीछे भविष्य में आने वाले परिणाम छोड़ते गए। उनमें से ही एक हिंदुओं और मुसलमानों के बीच की कटुता है, जो उन उपायों की देन है। दोनों के बीच यह कटुता इतनी गहराई से पैठी हुई है कि एक शताब्दी का राजनीतिक जीवन इसे न तो शांत कर पाने में सफल हुआ है और न ही लोग उस कटुता को भुला पाए हैं। क्योंकि इन हमलों के साथ ही साथ मंदिरों का विध्वंस, बलात् धर्मांतरण, संपत्ति की तबाही, संहार और गुलामी तथा नर-नारियों और बालिकाओं का अपमान हुआ था, अतएव क्या यह कोई आश्चर्यजनक बात है कि ये हमले सदैव याद बने रहे हैं। ये

मुसलमानों के लिए गर्व का स्रोत बने तो हिंदुओं के लिए शर्म का। परंतु इन बातों के अलावा, भारत का यह पश्चिमोत्तर कोना एक ऐसा मंच भी रहा है जिस पर एक निर्मम नाटक खेला जाता रहा। मुसलमानों के दल एक के बाद दूसरी लहर के रूप में इस क्षेत्र पर चढ़कर आते रहे और वहां से उन्होंने स्वयं को शेष भारत में छितराया। ये छोटी-छोटी धाराओं के रूप में शेष भारत में पहुंचे। समय आने पर वे अपनी सुदूरतम सीमाओं से पीछे भी हटे। जबकि वे वहां रहे तो उन्होंने भारत के इस पश्चिमोत्तर कोने में आर्य-संस्कृति पर इस्लामी संस्कृति का गहन प्रभाव भी छोड़ा, जिसने धार्मिक और राजनीतिक दोनों की दृष्टि से इसे एक सर्वथा अलग रंगत दे दी। मुस्लिम आक्रांता निस्संदेह हिंदुओं के विरुद्ध घृणा के गीत गाते हुए आए थे। परंतु वे घृणा का वह गीत गाकर और मार्ग में कुछ मंदिरों को आग लगा कर ही वापस नहीं लौटे। ऐसा होता तो यह वरदान माना जाता। वे ऐसे नकारात्मक परिणाम मात्र से संतुष्ट नहीं थे। उन्होंने इस्लाम का पौधा लगाते हुए एक सकारात्मक कार्य भी किया। इस पौधे का विकास भी उल्लेखनीय है। यह ग्रीष्म में रोपा गया कोई पौधा नहीं है। यह तो ओक (बांज) वृक्ष की तरह विशाल और सुदृढ़ है। उत्तरी भारत में इसका सर्वाधिक सघन विकास हुआ है। एक के बाद हुए दूसरे हमले ने इसे अन्यत्र कहीं की भी अपेक्षा अपनी गाद से अधिक भरा है और उन्होंने निष्ठावान मालियों के तुल्य इसमें पानी देने का कार्य किया है। उत्तरी भारत में इसका विकास इतना सघन है कि हिंदू और बौद्ध अवशेष झाड़ियों के समान होकर रह गए हैं। यहां तक कि सिखों की कुल्हाड़ी भी इस ओक (बांज) वृक्ष को काट कर नहीं गिरा सकी। निस्संदेह सिख उत्तरी भारत के राजनीतिक स्वामी हो गए। परंतु वे उत्तरी भारत को वह आध्यात्मिक और सांस्कृतिक एकता पुनः प्रदान नहीं करा पाए जिससे वह वेनसांग के पूर्व शेष भारत के साथ आबद्ध था। सिखों ने इसे भारत को वापस तो दिला दिया, परन्तु यह राजनीतिक तौर पर



एलसास लौरेन के तुल्य अलग हो सकने वाला और सांस्कृतिक रूप से पराया-सा ही बना रहा और जहां तक शेष भारत का संबंध था, उससे दूर-सा ही रहा। वह कल्पनाहीन व्यक्ति ही होगा जो इन तथ्यों पर ध्यान नहीं दे देगा अथवा इनकी विद्यमानता में इस बात पर आग्रह करेगा कि पाकिस्तान से तात्पर्य एक अखंड क्षेत्र का दो भागों में बंट जाना है।

पाकिस्तान और हिंदुस्तान के बीच हिंदू कौन सी एकता देखते हैं? यदि यह भौगोलिक एकता है तो वह कोई एकता नहीं है। भौगोलिक एकता प्रकृति-पोषित एकता होती है। भौगोलिक एकता के आधार पर राष्ट्रीयता के निर्माण में यह अवश्य ही स्मरण रखना चाहिए कि यह 'प्रकृति सुझाती है, मानव निपटाता है' जैसा मामला है। यदि यह बाह्य बातों जैसे कि जीवन-संबंधी आदत और रिवाजों के मामले में हो, तो भी यह कोई एकता नहीं है। ऐसी एकता तो एक सझे परिवेश का परिणाम होती है। यदि यह प्रशासनिक एकता है तो भी इसे एकता नहीं कहा जा सकता। बर्मा का उदाहरण सामने है। अराकान और तेनासेरिम पर येंदाबू की संधि के तहत 1826 ई. में अधिकार किया गया। पेगू और मातजिन को 1852 में कब्जे में

लिया गया, जबकि 1886 में ऊपरी बर्मा को कब्जे में लिया गया। भारत और बर्मा के बीच प्रशासनिक एकता 1926 में स्थापित हो गई थी। यह प्रशासनिक एकता एक सौ दस वर्ष से भी अधिक तक रही। 1937 में वह गांठ काट दी गई जिसने दोनों को बांधा था और किसी व्यक्ति ने एक आंसू तक नहीं गिराया। भारत और बर्मा के बीच एकता कम आधारभूत तो नहीं थी। एकता यदि स्थाई स्वरूपवाली होनी है तो उसका बंधुता पर आधारित होना आवश्यक है, जो सजातीयता की अनुभूति से प्रेरित हो। संक्षेप में, यह निश्चित रूप से आध्यात्मिक होनी चाहिए। पादे इन तर्कों और विचारों के आधार पर तोला और परखा जाए, तो पाकिस्तान और हिंदुस्तान के बीच एकता एक कल्पित बात भर है। वास्तव में पाकिस्तान और हिंदुस्तान के बीच की अपेक्षा हिंदुस्तान और बर्मा के बीच अधिक आध्यात्मिक एकता है। और यदि हिंदू बर्मा के भारत से अलग होने पर आपत्ति नहीं करते तो यह समझ में आ पाना कठिन है कि हिंदू पाकिस्तान जैसे उस क्षेत्र के अलग होने पर आपत्ति कैसे कर सकते हैं जो शेष भारत से राजनीतिक तौर पर वियोज्य, सामाजिक तौर पर विद्वेषी तथा आध्यात्मिकता की दृष्टि से परकीय है।

पद्म विभूषण जगद्गुरु रामभद्राचार्यः व्यक्तित्व और कृतित्व

विकास त्रिवेदी

जगद्गुरु रामभद्राचार्य जी के बचपन का नाम गिरिधर मिश्र था। इनका जन्म माघ माह कृष्ण पक्ष की एकादशी तिथि विक्रम संवत् 2006 के अनुसार 14 जनवरी 1650 को मकर सक्रांति के दिन उत्तर प्रदेश के जौनपुर जिले में हुआ था। ये सामान्य परिवार से थे। इनकी माता का नाम सच्चि देवी एवं पिता का नाम पण्डित राजदेव मिश्र था। पारिवारिक मित्र मीराबाई की भक्तिकाव्य में भगवान श्री कृष्ण को गिरिधर नाम से संबोधित करती थीं, जिसके परिणाम स्वरूप नवजात बालक का नाम गिरिधर रखा।

बालक गिरिधर की अल्पायु में ही नेत्र दृष्टि दोष (कैलेमाईन ट्रकोमैटिस) नामक जीवाणु के कारण एक संक्रमण रोग हो गया था, जिस कारण उनकी आँखों में लगातार दर्द बना रहता था। आँखों का कार्निया टूट गया, परिणामस्वरूप अन्धता से आँखों का प्रकाश चला गया तथा आधुनिक चिकित्सालय ना होने के कारण उचित उपचार नहीं हो सका। इस कारण उनका जीवन अंधकारमय हो गया जिसका पहला कु-प्रभाव यह हुआ कि वह सामान्य तरीके से शिक्षा ग्रहण नहीं कर सकें। केवल श्रवण-विधि ही उनके अध्ययन का आधार बना। अध्ययन करते हुए, इन्होंने समय के साथ-साथ रामायण, महाभारत, विद्यासागर, सुखदृ सागर, प्रेम-सागर, ब्रज-विलास आदि ग्रंथों को सुनकर कंठस्थ कर लिया। धीरे-धीरे ही इन काव्य ग्रंथों को जनमानस में सुनाने लगे। अल्पायु में ही उन्होंने अपनी सर्वप्रथम कविता रची, जिसको लोगों ने बहुत पसंद किया। इस कविता का प्रमुख सार माता यशोदा और भगवान कृष्ण की लीलाओं का वर्णन किया है, जिसमें माता यशोदा गोपियों द्वारा कृष्ण का उलहना दे रहीं हैं।

लगभग 5 वर्ष की आयु में सात सौ श्लोको वाली सम्पूर्ण भगवद्गीता कंठस्थ कर ली थी। सम्पूर्ण गीता का पाठ, संस्कृत मूल पाठ एवं गुरु की सहायता से छंद सहित संपूर्ण रामचरितमानस लगभग 6 दिनों में कंठस्थ कर ली। रामनवमी के दिन उन्होंने मानस

पाठ संपूर्ण किया, इसके साथ संस्कृत व्याकरण, प्रमुख उपनिषद संत तुलसीदास की अन्य रचनाओं सहित संस्कृत के अनेक रचनाओं को पूर्ण रूप से कंठस्थ कर लिया।

उपनयन संस्कार (जनेऊ) निर्जला एकादशी के दिन 1661 में अयोध्या के गुरु ईश्वरदास महाराज से गायत्री मंत्र के साथ दीक्षा प्राप्त किया। भगवद्गीता एवं राम चरित्र मानस का अल्पायु में ही अभ्यास कर लेने से गाँव के निकट ही राम कथा कार्यक्रम में प्रवचन समय-समय पर करने लगे।

आदर्श गौरी संस्कृत महाविद्यालय, जौनपुर (1667) से गिरिधर ने औपचारिक शिक्षा ग्रहण की। हिंदी के साथ आंग्ल भाषा, गणित, भूगोल और इतिहास विषय को सुनकर ही स्मरण कर लिया। स्मरण करने की अद्भुत क्षमता से संपन्न होने के कारण आचार्य ने कभी ब्रेल लिपि या अन्य साधनों का सहारा नहीं लिया।

तीन महीनों में उन्होंने विरचित ग्रन्थ लघु सिद्धांत कौमुदी का सम्यक ज्ञान भी प्राप्त किया। साथ ही प्रथमा एवं मध्यमा की परीक्षाओं के अंतर्गत उच्च शिक्षा प्राप्त के लिये संपूर्णानंद संस्कृत विश्वविद्यालय संस्कृत व्याकरण में शास्त्री स्नातक की उपाधि वर्ष 1671 में प्राप्त की, तत्पश्चात परास्नातक के समय वर्ष 1675 में अखिल भारतीय संस्कृत अधिवेशन में, नई दिल्ली आए। उन्होंने सांख्य, न्याय, वेदान्त, व्याकरण और अंत्याक्षरी में पांच स्वर्ण पदक प्राप्त किए। वर्ष 1676 में 7 स्वर्ण पदकों एवं कुलाधिपति स्वर्ण पदक के साथ उन्होंने आचार्य की उपाधि प्राप्त की। 30 अप्रैल 1676 को चतुर्मुखी ज्ञान के लिये समस्त विषयों का आचार्य घोषित किया गया। आचार्य की उपाधि पाने की पश्चात पी० एच० डी० की उपाधि के लिये पण्डित राम प्रसाद त्रिपाठी के निर्देशन में शोध के लिये पंजीकृत हुए। विश्वविद्यालय अनुदान योग (यू० जी० सी०) द्वारा शोध कार्य के लिये छात्रवृत्ति भी प्रदान किया गया। संपूर्णानंद संस्कृत विश्वविद्यालय



के व्याकरण विभाग के अध्यक्ष पद पर भी विराजमान भी रहें। और प्रण किया कि अपना संपूर्ण जीवन धर्म, समाज और दिव्यांगजनों की सेवा में हमेशा तत्परता के साथ कार्य करते रहेंगे एवं इसके पश्चात वर्ष 1667 में (वाचस्पति) की उपाधि प्राप्त की है।

वे कई भाषाओं के विद्वान हैं। वे बहुभाषाविद हैं। उन्होंने संस्कृत, हिंदी, अवधी, मैथिली सहित कई भाषाओं के अन्तर्गत पत्रिकाओं की रचनाएँ की है। वह बहुत बड़े आशुकवि है, जिसका पर्लक्षण उनके प्रवचनों में दिखता है। साथ ही साथ उन्होंने 80 से अधिक पुस्तकों और ग्रंथों की रचना की है। जिनमें चार महाकाव्य (दो संस्कृत और दो हिंदी में), रामचरितमानस पर हिंदी टीका, अष्टाध्यायी पर काव्यात्मक संस्कृत टीका और प्रस्थानत्रयी (ब्रह्मसूत्र, भगवद्गीता और प्रधान उपनिषदों) पर संस्कृत भाष्य सम्मिलित हैं। वे रामचरितमानस की एक प्रमाणिक प्रति के संपादक जिसका प्रकाशन तुलसी पीठ द्वारा किया गया है। भारत के भिन्न-भिन्न नगरों और विदेशों में भी नियमित रूप से उनकी कथा आयोजित होती रहती है। कथा के कार्यक्रम संस्कार टीवी, सनातन टी.वी. इत्यादि चैनलों पर प्रसारित भी होते हैं। इस सांस्कृतिक जागरण के लिए 2015 में भारत सरकार ने उन्हें पद्म विभूषण से सम्मानित किया।

2001 को उत्तर प्रदेश के चित्रकूट जिले में विधानमंडल द्वारा पारित जगद्गुरु रामभद्राचार्य विकलांग विश्वविद्यालय अधिनियम से प्रतिस्थापित किया गया। यह भारत का प्रथम विकलांग विश्वविद्यालय है। इस विश्वविद्यालय का गठन उत्तर प्रदेश सरकार के अध्यादेश द्वारा किया गया। दिव्यांगजनों की सुविधाओं से युक्त जगद्गुरु रामभद्राचार्य विकलांग विश्वविद्यालय को स्थापित करने का मुख्य कारण दिव्यांगजनों की उच्च और व्यावसायिक शिक्षा में अधिकतम सहभागिता सुनिश्चित करना था। उसमें दिव्यांग विद्यार्थियों के लिये एक सुलभ, मितव्यय और उचित शिक्षा प्रदान की जाती है।

जगद्गुरु रामभद्राचार्य विकलांग विश्वविद्यालय में संस्कृत, हिंदी, आंग्ल भाषा, समाज शास्त्र, मनोविज्ञान, संगीत, चित्रकला (रेखाचित्र और रंगचित्र), ललितकला, विशेष शिक्षण, प्रशिक्षण, इतिहास, संस्कृति, पुरातत्वशास्त्र, आधुनिकविज्ञान, व्यावसायिक शिक्षण, विधिशास्त्र, अर्थशास्त्र, में स्नातक स्नातकोत्तर

और डॉक्टर की उपाधियां प्रदान करता है।

वर्तमान में दृष्टिबाधित, मूक-बधिर और अस्थि-दिव्यांग विश्वविद्यालय में अध्ययन कर रहे हैं। विश्वविद्यालय ने पांच संस्थानों के साथ अनुबंध अनुबोधक हस्ताश्रित किया है। जिसमें भारतीय सूचना प्रौद्योगिकी संस्थान, इलाहाबाद, श्री सदगुरु सेवा ट्रस्ट, चित्रकूट धाम, प्रमस्तिष्क अंगघात विभाग, निजाम आयुर्विज्ञान संस्थान, हैदराबाद मनोविज्ञान विभाग, इलाहाबाद विश्वविद्यालय तथा राष्ट्रीय दृष्टिहीन विकलांग संस्थान में देहरादून है। विश्वविद्यालय का उद्देश्य दिव्यांग विद्यार्थियों का स्वाधीन और स्वालंबी बनाना है ताकि वे सभी मुख्य धारा से जुड़ें रहें। हम सब जानते हैं कि सभी मनुष्य में कुछ न कुछ अन्तर्निहित क्षमताएं होती हैं। जिसके विकास के लिए एक उचित वातावरण कि आवश्यकता होती है। यह विश्वविद्यालय दिव्यांगजनों के क्षमताओं का परिमार्जन कर रहा है।

अगस्त 2000 में न्यूयॉर्क में संयुक्त राष्ट्र संघ द्वारा आयोजित सहस्राब्दी विश्व शांति शिखर सम्मलेन में भारत के अध्यात्मिक और धार्मिक गुरुओं में जगद्गुरु रामभद्राचार्य ने संयुक्त राष्ट्र संघ सभा को संबोधित करते हुए, उन्होंने भारत और हिन्दू शब्दों की संस्कृत व्याख्या और ईश्वर के सगुण और निर्गुण स्वरूपों का उल्लेख करते हुए विश्व शांति पर व्यक्तव्य दिया। इस वक्तव्य द्वारा उन्होंने विश्व के सभी विकसित और विकासशील देशों को एकजुट होकर निर्धनता उन्मूलन, आतंकवाद और निःशस्त्रीकरण के लिये प्रयासरत होने का अह्वान किया। वक्तव्य के अंत में उन्होंने शांति मंत्र का पाठ किया। आचार्य रामभद्राचार्य अपने जीवन में समाज व राष्ट्र निर्माण के लिये हमेशा समर्पित रहें। अपने आप का मानव कल्याणार्थ विशेषकर दिव्यांगजन को ही समर्पित किया। वर्तमान समय में दिव्यांगजन को रूप से पुनर्वासित करते हुए, समाज की मुख्य धारा से जोड़ने का सशक्त प्रयास कर रहे हैं। ताकि उनका सामाजिक, आर्थिक, एवं स्वास्थ्य के दृष्टिकोण से पुनर्वास हो सकें।

आचार्य का जीवन समाज कल्याण हेतु समर्पित है। भारतीय चिंतन, दर्शन और सांस्कृतिक मूल्यों कि स्थापना में आचार्य रामभद्राचार्य जी का योगदान अविस्मरणीय है। आचार्य भारत के सांस्कृतिक चेतना के वाहक हैं।

Role of Social Work in Rehabilitation of Persons with Disability in Uttar Pradesh: Problems and Prospective

Dr. Madhushikha Srivasatava

“For most people, technology makes things easier. For people with disabilities, technology makes things possible.”

~ Mary Pat Radabaugh

There can be many reasons for disability such as the lack of complete development of the fetus during pregnancy, due to poor physical development due to poverty, disability due to accidents, and due to damage caused by many types of disasters. As per the Census 2011, in India out of the 121 Cr population, 2.68 Cr persons are ‘disabled’ which is 2.21% of the total population. Among the disabled population there are 56% (1.5 Cr) are males and 44% (1.18 Cr) are females. In the total population, the male and female population are 51% and 49% respectively.

For improving the status of disabled persons, U.P. has taken many steps. The Department of Empowerment of Persons with Disabilities was constituted in 20-09-1995 by the State Govt. for the all round development of the helpless, disadvantaged and weak financially disabled persons of the society and for the easy functioning of the plan & program to give the benefits & assistance to the disabled. According to 2011 Census of India, the total number of people with various disabilities in Uttar Pradesh is 4157514. This is about 2.08 % of the total population of U.P.

Through this paper, it was tried to know the status of disabled persons in U.P., to express the role of social work to help the differently able, because social work is committed to help every section of the society, which has not got proper

place in the mainstream of the society. It believes in helping any individual, group, community in such a way that it becomes capable of helping itself. Therefore, social work is also playing a crucial role for the welfare of the disabled. The study is based on secondary data, collected from many types of books, newspapers, magazines, online sources.

Introduction

The use of the word Divyang in place of Disabled is actually associated with a morale boosting motivational emotion. Honorable Prime Minister Shri Narendra Modi discovered a strong person in a disabled person which is really valuable in every manner, through this word ‘Divyangjan’ instead of ‘disability’. In fact, disability is not just related to any particular country, it is in India as well and exists like a problem in every country of the world.

There can be many reasons for disability such as the lack of complete development of the fetus during pregnancy, due to poor physical development due to poverty, disability due to accidents, and due to damage caused by many types of disasters. disability etc. Disability becomes a condition due to which a person feels difficulty in fulfilling the daily needs and is affected, which includes eating, drinking, bathing, washing, self-hygiene as well as going



anywhere, shopping for essential goods, cleaning the kitchen or house, cooking, relying on others for transport etc.

It is known from the census 2011 that the total population of India is 121 crores, out of which total 2.68 crores are disabled people, whose percentage is 2.21% of the total population and if we talk about the different number of men among the disabled then 56% are men and 44 % are women whose percentage out of the total population is 51%, 49% and 69% of people with disabilities are living in rural areas.

For improving the status of disabled persons, Uttar Pradesh has taken many steps .The Department of Empowerment of Persons with Disabilities was constituted in 20-09-1995 by the State Govt. for the all round development of the helpless, disadvantaged and weak financially disabled persons of the society and for the easy functioning of the plan & program to give the benefits & assistance to the disabled. According to 2011 Census of India, the total number of people with various disabilities in Uttar Pradesh is 4157514. Which is about 2.08 % of the total population of U.P., this includes persons suffering from visual impairment, speech

General and disabled population in India

Indian population(census-2011)in Cr				Divyangjan population	
Total population	Males	Females	Total	Males	Females
121.08	62.32	58.76	2.68	1.5	1.18

Source- 2011 Census

related problems, hearing disability, osteopathy, intellectual problems which are associated with mental developments & some other kinds of disability

Rational of the study :

This paper is trying to find out the condition of the disabled in the society, the steps taken by the government to improve their condition, related policies, programmes, legal actions etc. To know the status of Disabled persons in Indian context specially in Uttar Pradesh and to know the role of Social work in helping this strong group of the society is very important because Social Work is committed for the help of every section of the society who did not get the proper place in the mainstream of the society which it should have got. Social work believes in helping any individual, group, community in such a way that it becomes capable of helping itself and, S.W. is playing a very helpful role for the welfare of the differently-able. Therefore this study is very important

Core Objective:

To analyze the status and some efforts or achievements for disabled person in India, especially in Uttar Pradesh.

To know the importance of social work and its utility for the help of Divyangjan.

Hypothesis

Policies and programmes for the disabled person are playing an important role in improvement of their status.

There is a big need of proper implementation and to spread awareness about the welfare programmes, policies and schemes for disable persons in every state of India.

Data Base :

The present work is obtained by subsidiary data, which has been collected from many types of books, newspapers, magazines, Census of India 2011 , Reports and online sources related

to the problem. On the basis of these collected material, some suggestive measures have also been tried to be presented.

Limitations:

The study is limited to data base of books, newspapers, magazines, Census of India 2011, Reports and online sources only.

What is Disability?

Disability is a condition that results from a permanent injury, illness, or physical or mental condition that creates conditions abnormal for normal living.

The United Nations Convention on the Rights of Persons with Disabilities has defined disability as follows: Chronic physical, mental, intellectual or sensory impairments that interact with various barriers to [an individual's] full and effective participation in society on an equal basis with others.¹

Types of disability:

Disability is mainly divided into two parts, physical disability and second mental disability have been kept in the first category.

Under physical disability, underdeveloped body parts and damage to physical parts due to accident etc. is included. Low vision disability, speech disability, movable disability, and hearing disability are subcategories of physical disability. Mental disability is also a type of disability, which was not given any place under disability in India before 1955, but only after the implementation of balanced opportunity & protection of officers and full participation Act in 1955, mental disability is also included in other disabilities. The place was given, under which two subcategories have been kept. In the first, mental illness has been kept and in the second mental retardation has been included. In the efforts made for the welfare of

the disabled, a commendable effort was made by the Govt. of India with the formation of the NATIONAL COMMISSION for Disabilities on 15 August 2003.

Mental retardation refers to below average monthly performance. Therefore, by monthly retardation, there is a lack of speed of mental growth and development. "Mental retardation refers to the abnormal general intellectual function that appears in the developmental stages of a person and is related to his adaptive behavior.'

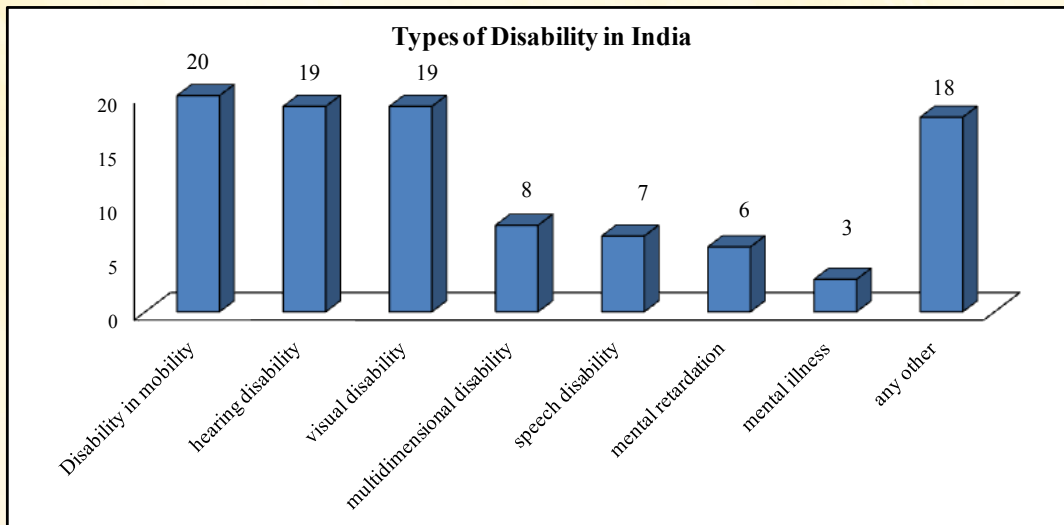
The 2011 census takes place by the states, in India, better concepts, questions related to ideas, methods of dissemination, systems etc. were adopted for collecting information related to Divyangjan. Five types of disabilities were detected by the 2001 Census and the data related to them was obtained, while in the 2011 Census, data related to eight types of disabilities were collected.

According to the International Classification of Functioning, Disability and Health (ICF), Categorization of Disability is divided into a number of broad sub-categories, which include the major 8 main types of disability which are as follows:

1. mobility/physical
2. spinal cord (SCI)
3. Head Injuries(TBI)
4. Vision
5. hearing
6. cognitive/learning
7. psychological
8. Invisible

According to the pie chart of 2011 census, maximum 20% disability is related to mobility. 19% is related to hearing as well as 19% is also percentage of visual disability, 8% of disability is percentage of multidimensional disability

¹UN General Assembly, *Convention on the Rights of Persons with Disabilities* adopted by the General Assembly, 24 January 2007, A/RES/61/106, available at: <https://www.refworld.org/docid/45f973632.html> [accessed 27 December 2020]



Source : Social Statistics division MSPI, Govt. of India, -<http://www.mospi.gov.in> (Census-2011)

Problems of Disabled Person

Disability affects all the aspects of life of any person who is facing this problem in their life and it causes isolation from the society. The isolation creates negativity, stress, depression and many types of harms to the overall personality of the individual. A disabled person faces many hurdles in their life such as in education, related to the normal living, social adjustment and many more. Disability has many effects on the personality of any disabled person, some of which are as follows:

1. social and emotional inappropriateness
2. lack of motivation
3. limited individual variation
4. physical inferiority
5. adjustment problem
6. lack of creativity
7. Problems of adjustment in family, school and society

Commendable efforts, Policy and Schemes for Persons with Disabilities by the Government of India:

Many commendable efforts have been made by

the Government of India to help the disabled, some of which are as follows:

1. On August 15, 2003, the **National Commission for Disabilities** was formed, whose main objective is to coordinate state level functions. Disabled Commissioners, to monitor the allocation and utilization of grants released by the Govt. of India for the welfare of the disabled, to the disabled for their purposes. To create awareness about the facilities created and to investigate cases related to violation of rights of persons with disabilities.
2. **Rashtriya Viklang Niti 2006**, Under this, the life of protecting the rights of the disabled was taken to connect the disabled with the main stream and efforts were made to provide necessary equipment to the disabled, their rehabilitation, education, economic betterment, detection of disability. The important fact is that under this policy, appropriate guidelines have also been issued to various ministries, state governments and NGOs for the welfare of the disabled.
3. **Program for rehabilitation of persons with disabilities:** Rehabilitation is as important a step as welfare and conservation and cannot be overlooked in the national effort. Under the National Program in Rehabilitation of

the Disabled, Disabled Rehabilitation Units are being established in health centers in rural areas, under which awareness is being spread about the types of disability, treatment and prevention, as well as providing rehabilitation facilities.

4. **Rehabilitation Council of India:**

It was established in 1992, under this council, the details of rehabilitation programs being done for the welfare of disabled people all over the country are collected and monitored. Under this the following roles are performed:

1. Manicure the courses of all handicapped training institutes in the country
2. To give recognition to all disabled training institutes and universities in the country
3. To encourage research in the field of special education for the rehabilitation of persons with disabilities.
4. Maintaining a Central Rehabilitation Register detailing the institutions and organizations working in the field of rehabilitation.
5. To maintain co-ordination among NGOs for regularization and continuity of rehabilitation education program.

5. **Rashtrya Viklang Punarvas Karyakram:**

The main objective of this program is to reach the facilities related to social, vocational and psychological rehabilitation for the disabled, under this, counseling and rehabilitation assistance is provided to the disabled people and their families mainly in remote areas and rural areas.

6. **Deendayal Viklang Punarvas Yojna :**

This scheme is also known as Swachhta Work Promotion Scheme. This is a good initiative under which rehabilitation centers were established for the help of disabled people with leprosy, for which the efforts of

manpower in the field of mental disability and cerebral palsy were established. Financial assistance is given to educational organizations and non-organizations for the establishment and development of special schools for major areas of disability such as visual, hearing, visual and mental disabilities, complete development and disability.

7. **Rashtriya Viklang Vitt aur Vikas Nigam:** It is working to motivate the disabled person / divyangjan for self-employment and to arrange finance for them. It undertakes the responsibility of providing loans to persons with disabilities and thus this corporation develops entrepreneurship, technical assistance, skill development, self-reliant life etc.

8. **Special Employment Centres:** Special Employment Centers: There is a section of Special Employment Cells in all Employment Exchanges of our country where employment assistance is given to people with special needs, in addition to this, eight percent financial assistance of Special Employment Cells by the Central Government and 80 percent financial assistance to Special Employment Centers. Assistance is provided. Equal Opportunities for divyangjan, Protection of Rights and Full Participation Act 1995, it has been said to give equal opportunities to disabled persons according to their ability in jobs etc.

9. **Stablishment of Special Schools:** The central government provides financial assistance of up to 90 percent to NGOs working in this field to open special types of schools for children with disabilities.

10. **District Rehabilitation Center Scheme:** In the context of India, it would be fair to say that India lives in villages, so it is estimated that about 75% population is residing in gramin areas and maximum availability of facilities for disabled people is in cities. In order to reach this facility to the villages, this scheme was launched through the MINISTRY



of SOCIAL JUSTICE and EMPOWERMENT in 1983. This center is dedicated to the people with disabilities, prevention of disability, detection of disability, medical intervention and surgical treatment, distribution of artificial aids and devices, physical therapy, occupational therapy and speech therapy, local work for people with disabilities. providing employment to disabled person etc.

11. **Integrated Education Program for Disabled Persons:**

In 1947, the National Policy Recommendation for Education of Disabled Children was integrated into the education of children with disabilities. Earlier there was no such system, education system was made for the children in special residential schools. This program was really very right, in which arrangements were made to give education to ordinary children together. This effort did a great job of reducing the inferiority complex among the children with disabilities. And the survivors of this system had post addresses in these schools by staying in their homes, whereas earlier they had to live in special residential schools only. This scheme is done there by the central government all over the whole. Under this the following facilities are provided:

1. Rupees 800 is provided as Assistance Equipment Allowance for each child over a period of five years.
2. Assistance for learning material is provided to each child every year.
3. A reading aid allowance is made available to blind children every month.
4. In view of the actual condition of the disabled, assistant allowance is made available so that he can get help for walking.

12. **Efforts made in various five year plans:**

several efforts also done for developing and

protecting the rights of divyangjan in India. Some of the provisions in the five year plans for persons with disabilities are as follows:

1. **First Five Year Plan:** Under this plan, the first objective was kept in this direction that those NGOs should be reformed which are working for the betterment of the disabled.

Survey on the problems faced by physically and mentally handicapped persons for their protection and rehabilitation.

2. **Second Five Year Plan:**

- a. Scholarships were provided for the handicapped.
- b. Adarsh vidyalaya opened for blind and disabled children.
- c. Section for women set up in training schools set up for adult blind

3. **Third Five Year Plan:**

- a. Arrangements for entertainment were made available for the disabled children.
- b. The scheme of providing education to the disabled persons at their homes was also implemented.
- c. Arrangements were made to help the disabled through special assistive devices.

4. **Fourth Five Year Plan:**

- a. Model schools were established in Delhi for mentally challenged children and they were also expanded.
- b. Along with the education of disabled persons, arrangements were also made to train teachers for their training.

5. **Fifth Five Year Plan:**

- a. Under this, the divisional training centers established in Delhi, Kolkata, Madras, Bombay were further improved for the training of blind teachers.

- b. The grants of NGOs working for the welfare of disabled people were also increased.

6. Sixth Five Year Plan:

- a. Under this, persons with disabilities were included in the TRISEM scheme.
b. Primary education was arranged on a big star for disabled persons.

7. Seventh Five Year Plan:

- a. Under this scheme, the scheme of giving scholarships to disabled students at the level of primary education was forwarded by the state governments.
b. Programs on vaccination against smallpox and other disability-related diseases were widened.

8. Eighth Five Year Plan:

- a. Under this scheme, programs were run to deal with the deficiency of vitamins, iodine and blood and its scope was increased.
b. Vocational education was further expanded and employment opportunities were provided.

9. Ninth year plan :

- a. Under this scheme, by distributing supplementary nutrition to disabled mothers, efforts were made to make them healthy.
b. National institutions set up for persons with disabilities were empowered.

10. Tenth Five Year Plan:

- a. Under this scheme, vaccination programs were run for the prevention of diseases like polio, whooping cough, measles etc.
b. Arrangements were made to reach services to physically handicapped persons residing in rural areas.

11. Eleventh Five Year Plan:

- a. Under the Eleventh Five Year Plan, an effort was made to develop the capacity of the disabled with respect to their rights and awareness of their rights.
b. Ensuring emphatic full participation and inclusion of the divyangjan in the society.

12. Twelfth Five Year Plan:

- a. Under this, a resolution was taken to eradicate polio from the root.
b. Provision was made for the establishment of special types of schools and research institutes for the welfare of the disabled.

Status of disability & related Policy and Schemes for Persons with Disabilities in Uttar Pradesh:

On September 20, 1995, the Government of Uttar Pradesh constituted the Department of Empowerment of Persons with Disabilities, under which the all-round development of the helpless, disadvantaged and weak financially disabled persons of the society and to ensure the arrangements for smooth operation of schemes made for their benefit and assistance. emphasized.

It is known from the data of Census of India 2011 that the total number of people suffering from various disabilities in Uttar Pradesh is 4157514 and it is about 2.08% of the total population of the state. These include persons suffering from visual disability, speech disability, hearing disability, bone disability, mental problems and other disabilities. This department, through its schools, is trying to fulfill the needs of the differently abled students belonging to different age groups, literacy levels. Along with the establishment and operation of a residential hostel, Braille Press for students, Dr. Shakuntala Mishra National Rehabilitation University has also been established, through which educational assistance is being provided mainly to the differently-abled students suffering



from different categories of disabilities.

Several welfare schemes have been run by the department -

- Arrangement for shelter home-cum-training center, skill development center, grant, pension, assistance and artificial limbs/ assistive devices etc. for destitute disabled persons.
- National / State level awards for persons / institutions working in the field of disability / disability and encouraged to fulfill the above obligations delegated by the Act using Corporate Social Responsibility (CSR) initiative on marrying a Divyangjan. do.
- This department is always striving for the all round development and upgradation of Divyangjan through the schemes of providing livelihood opportunities, like through shop construction and their operation scheme, reservation/rebate in several state/post-state services.
- Creation of barrier free environment for accessible movement for differently-abled, development of quality of surgical life and ensuring participation.
- The department actively endeavors to develop a more equitable, progressive decision-making system and awareness of specific situations of persons with disabilities by incorporating suggestions, experiences, expectations from various stakeholders, service providers, NGOs and eminent persons.

Grant (Divyang Pension) Scheme for Maintenance of Destitute Divyangjan:

Under this scheme, a grant is provided for maintenance to persons with disabilities above the age of 18 years and having minimum 40 percent disability who are actually residents of Uttar Pradesh.

- In this, the person receiving pension/grant/ assistance under old age pension, widow

pension, socialist pension or any other similar scheme and persons getting free maintenance in government institutions/ homes cannot get the benefit.

- The decision of the District Magistrate for the eligibility of the beneficiaries is final.
- Persons with disabilities falling within the definition of income poverty line (currently Rs 46080 / - in rural areas and Rs 56460 / - per family per year in urban areas) are eligible for grant. The rate of grant in this scheme is Rs.500/- per beneficiary per month, which is also revised from time to time by the government or can be done.

Leprosy Pension Scheme:

Grant-in-aid is provided for the maintenance of people suffering from leprosy in families with helpless and insufficient resources, under persons with disability (irrespective of the percentage of disability) due to leprosy, who are native of Uttar Pradesh. Residents and those who have received the related disability certificate from the Chief Medical Officer of the district and persons with disabilities due to leprosy of any age group, are eligible for pension / grant of Rs. 2500/- per month. Application form can be filled by Divyangjan through Jan Suvidha Kendra/Lokvani/Internet and updated status of e-application can also be obtained. The amount is paid to the beneficiary through e-payment in their bank account.

Grant-in-aid scheme to physically handicapped persons for purchase and repair of artificial limbs and hearing aids etc.:

Under this scheme, financial grants are provided to such persons with disabilities to buy artificial limbs and assistive devices, or whose family's (in the case of a dependent) annual income from all sources, the income fixed for the poverty line, currently in rural areas is Rs. 46080/- and in urban areas Rs. 56460/- per family per year does not have the prescribed income and maximum amount of financial

grant to them per beneficiary is Rs. 8000/- per beneficiary. Under the scheme, many types of artificial limbs / assistive devices can be provided to the disabled people according to their disability, such as tricycle, wheelchair, CP. Chairs, Crutches, Walking Sticks and Walking Frames Accelerators, Arithmetic Frames, Abacus, Geometry Kits or Braille Educational Kits, Blind Sticks, Hearing Aids and Educational Kits, MSID. Kits (Multi-sensory Education Development Kits), ADL Kits etc.

Surgical grant for the prevention of disability:

In one year for surgery for the prevention of disability, Rs. 8000/- per beneficiary there is a system of reimbursement.

State Level Award for Empowerment of Divyangjan:

Every year, on World Disabled Day on 03rd Dec., state level awards are given to skilled handicapped employees/self-employed persons with disabilities, employers of persons with disabilities and excellent placement officers, persons/institutions doing excellent work for the benefit of disabled persons. A shield, a certificate and a cash prize of Rs 25000/- are given as a reward.

Braille press operation:

A hostel for visually impaired students studying in higher education has been set up in Nishatganj, Lucknow. Press is being operated to publish books in Braille for the reading and reading of visually impaired students in the state.

There are some other schemes are also being running in the state which are given bellow:

- Scheme to provide free travel facility to Divyangjan in State Transport Corporation buses
- Marriage Incentive Reward Scheme
- Shop construction / shop operation plan for rehabilitation of Divyangjan
- Training of teachers to identify children affected by Dyslexia and Attention Deficit and Hyperactivity Syndrome

- Assistance to voluntary organizations to run shelter home cum training center for mentally retarded and mentally ill destitute disabled people
- Assistance to Voluntary Organizations/ Institutions

Some efforts towards the Divyangjan by different kind of agencies in different countries :

Disability is not an issue related to any country, border or time, it can affect anyone anywhere, so commendable cooperative steps have been taken in this field not only in India but all over the world, some of which are as follows:

ADARA:

This is a business networking service that delivers services to people who have hearing loss or deafness. ADARA is a co-partnership arrangement of organizations in national level, partners (locally), professionally related groups and individual unit to support delivery of social programme execution and resettlement, specially for divyangjan

AMERICAN ASSOCIATION OF PEOPLE WITH DISABILITIES

AAPD is specially assigned to the welfare of Divyangjan, to strengthen their political and economic power. At the same time it is contributing as a connector, connector and catalyst for change.

AMERICAN COUNCIL OF THE

In it near about 70 state chapters has been included and these are special-interest affiliates, particularly blind community that represent students, families, government employees, teachers, lawyers, entrepreneurs and groups.

THE ARK

Ark was previously known as the "Association for Retarded Citizens of the United States". The Ark is the biggest national community establishment for the disabled, advocating for serving and supporting people with intellectual, incompetence in development.



COUNCIL OF STATE ADMINISTRATORS OF VOCATIONAL REHABILITATION

Under the CSAVR, a group of key administrators of public rehabilitation agencies working together to serve persons with physical and mental disabilities residing in the District of Columbia, states, and territories.

DEAF INITIATIVE IN INFORMATION TECHNOLOGY

It is a new initiative for deaf at the ROCHESTER INSTITUTE of TECHNOLOGY. It is a programme of the National Institute of Technology's Department of Applied Computer Technology (ACT). Workshops and training are provided. It prepares deaf people for employment in the National workforce or in Information Technology.

Disability:IN

It gives the right to disability inclusion and equality in occupations. It prepares, manages and determines the Annual Disability Equity Index (DEI), and is a completely free benchmarking tool that provides a confidential opportunity to obtain an objective score on specially able inclusion, policies and program.

EMPLOYER ASSISTANCE and RESOURCE NETWORK on DISABILITY INCLUSION

EARN is an organization created to fully support organizations with disabilities in their efforts to find employment, keep them stable and inspire them to pursue their goals. It is committed to educating government and private sector organizations to adjust, advance towards building workplace cultures.

TASH

TASH, founded in 1975, is an international leader in the advocacy of persons with disabilities. It works for the isolation, abuse, neglect and institutionalization of persons with disabilities and protects their human rights and empowers them.

HONORABLE MENTION: Invisible Disabilities Association

This association works for people suffering from invisible diseases, various types of disabilities. Its objective is to educate, motivate and pander people, community and organisations affected by disease, pangs and inability in world, and connect them to achieve success in this field.

The International Classification of Functioning Disability and Health (ICF):

The "ICF" name was approved by the World Health Assembly on May 22, 2001 for the International Classification of Functioning, Disability and Health. It is a assortment of health factor of work and disability which was created in 1980 and then called International Disability, Disability and Disability, or ICIDH by WHO to provide a unified framework for classifying health components of functioning and disability.

Disabled World:

It is an independently functioning disability community founded in 2004 to provide disability news and related information to help specially able, senior citizens, their family members and/or caregivers.²

Some other agencies are also working in this area, like JOB ACCOMODATION NETWORK, NATIONAL ASSOCIATION of the DEAF, NATIONAL ORGANIZATION on DISABILITY. Other countries have also made tireless efforts for empowerment, improvement in the field of disability, which is very commendable for humanity.

Role of Social Work towards Disability in India :

Social work has an important role in rehabilitation of Divyangjan. The main objective of social work is that it should help the person in such a way that the person becomes capable of helping himself. A skilled social worker can play his role well in various differently abled related institutions

²https://en.wikipedia.org/wiki/List_of_disability_organizations

through counseling. Social worker can develop a smooth flow of hope among the differently-abled through awareness camps and seminars. Primary Methods of Social Work, Individual Social Work, Group Social Work Community Organizations can prove to be capable of serving the interests of persons with disabilities in the society If they are used in government schemes also, that too in a planned manner and as an essential element.

various types of national institutions government organizations And also through NGOs, social workers can help through the methods of social work.

As we know that According to the government efforts to improve the status of disabled persons in the society the rehabilitation standards for persons with disabilities can basically be divided into three categories-

In first category it is required to detect the disability as soon as possible, counselling, medical assistance and device-based physical rehabilitation. In second category the Educational rehabilitation including vocational education is required and in third category the economic rehabilitation should be provided to lead a dignified life in the society with disability.

For all the above categories, the technique of Samajkary can prove to be very effective. Social work is a social science that includes principles, methods, psychological methods, medical training, etc. different types of social work Specialization in the subject of the Social Work subject trains a social worker according to the existing social problems which are effecting the society as well as persons

There is just a need for skilled social worker who can get proper opportunity to help these disabled people. Through social work, a social worker becomes able to understand the personality of any person to a great extent.

And by catching the positive feelings of his client, knowing his interest in the client through psychological methods, he tries to infuse new energy in him, due to which the client starts

feeling self-confidence, self-esteem in himself.

Conclusion:

In conclusion, we can say that many initiatives have been taken not only in foreign countries but also in India for the benefit of disabled people. Relentless efforts have also been made by Uttar Pradesh, but the matter does not end with efforts. The point is when the success of these efforts can be accurately and accurately assessed. The people with disabilities are not even aware of the policies, schemes etc. made for them, most of the people are in rural areas, where there is a lack of awareness in the whole system for education as well. Government policies need to be implemented properly to reach the needy.

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Ground Realities of Right to Person with Disabilities Act-2016 with special reference to District Meerut

Afreen Almas¹

Prof. (Dr.) Vaibhav Goel Bhartiya²

Perfection leads to satisfaction and satisfaction leads to a happy life. Life, per se human life is a life of men and women who are living in the society with one explicit biological structure. But at times such explicit biological structures have few deformities by birth or by accident which is known as disability. Disability in general not found acceptable in the society and acts like curse to any human being. With the passage of time human being with disability, have been termed as differently abled or specially abled person_ A differently abled person faces a stigma of being unproductive elements of the society. Differently able use to face gross human rights abuses, due to various reasons. These issue may effects their right to life which include right to choice and right to marry, self-employment, accessible infrastructure, violation of sexual and reproductive rights , low Wry rates, easily targeted for rapes and sexual abuse etc

It was 2007 when India signed and ratified the UN Convention on the Rights of Persons with Disabilities', Indian legislature started the process of the replacement of the 'Persons with Disabilities Act, 1995. Finally in 2016 the Rights of Persons with Disability Act, 2016 was passed by both the houses of the Parliament. Despite the foundation of disability jurisprudence in India there is gross violation of human rights of differently abled persons that needs to be addressed. Hence the present study is to highlight the gaps and to suggest a mechanism to resolve such gaps.

INTRODUCTION

would my advice to other disabled people would be, concentrate on things your disability doesn't

prevent you doing well, and don't regret the things it interferes with. Don't be disabled in spirit as well as physically."

-Stephen Hawking In an era where 'inclusive development' is essential element for the holistic development of the life, inclusive policy is essential. Here an inclusive policy means the policy which may address

the welfare of all the segments of the society. The society, which consist of all the human

being like child, adults, men, women, abled, differently abled and so on. Therefore, it is expected that law making agencies should develop the policy for all and special policies for the marginalized groups on the basis of the personal attributes or bodily requirements. In this category differently abled should be on the top priority to have inclusive policies with equal opportunity to all along with one specific body for the proper monitoring of the human rights of differently -abled in the country. Though there are numerous documents on the subject still the problem persists unchanged. In 2015 world community come up with one document named as 'Sustainable Development Goals-2015' to address the issues of every individual with no exclusion. In the document Human Dignity was considered as paramount to meet out the development goal for the entire world community including all segments of the society.

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Meaning Disability

The special ability, previously known as disability has remained a debatable concept. Its meaning keeps on changing under different circumstances and by the different communities.

i.- According to oxford dictionary - mobility means a physical or mental condition that limits a person's movements, senses, or activities.

P. The CRPD5 explains that: "Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with

According to The Rights of Persons with Disabilities Act, 2016- "person with disability"

describes it as a person with long term physical, mental, intellectual or sensory impairment United Nations Convention on the Rights of Persons with Disabilities Convention on the Rights of Persons with Disabilities, Art. 1

Rich, in interaction with barriers, hinders his full and effective participation in society equally with others

Rights of Persons with Disabilities Act, 2016

Under Article 15 of Re Indian Constitution is a manifestation of "Right to Equality" under article 14, as it enshrines a specific dimension of the principles of equality relating to discrimination by state or various grounds. The Rights of Persons with Disabilities Act, 2016 along with the Rights of Persons with Disabilities Rules, 2017 were enacted by the Indian parliament. These two new enactments reflect that present legal regime is in consonance with the United Nations Convention on the Rights of Persons with Disabilities. As per the requirement any person with disability may get protection against various forms of discrimination. There are process through which one has been given increased measures for effective participation with inclusive approach

to ensure equal opportunity with sufficient accessibility.

Disability Statistics

According to census 2011, the State of Uttar Pradesh has the highest number of disabled persons (16% of the total disabled in the Country). There are 66225 disabled people in Meerut district. So another area that needs to be seen is whether provision of the Act fulfills the right based requirement of the differently – abled person in Meerut district which constitute of about 1.59 % of disabled population of the state.

AREA OF STUDY

It will include problems of differently abled in general but geographically it is restricted to Meerut District particularly (3 tehsit and 12 blocks) in the State of Uttar Pradesh. This will also include perspective of disabled pre-2016 and post 2016 enactment. The problem of divyangjan is global issue by and large with identical issues and challenges before divyangjan across the world. But there may substantial regional variations in some area and specific issues due to law, executive agency, and acceptance in the society per se maturity of society.

So far as discipline wise area is concern it will be purely a socio-legal study and which will touch a corner of financial aspects.

Section 2 (s) of Rights of Persons with Disabilities Act, 2016. This Act replaced The Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995

RESEARCH METHODOLOGY

The present research will undertake current situation of differently-abled with analytical global overview of the problem with a empirical pilot study on District Meerut (Uttar Pradesh) i.e. of atrocities, discrimination and other inhuman

treatment/ mistreatments inflicted on them due to disability. Since the nature of research is directly associated with the social welfare nevertheless then legal autonomy for which at one place non-doctrinal tools and for another place doctrinal tools will be applicable in course of research. Pandemic and paucity of time has cause certain limitations in research.

Data was collected through close ended questionnaire. Questionnaire was made for two categories of respondents

Respondent's Category (Meerut District)

Category 1 & Category II

Government department/ academic institutions

Adult Divyangian Questionnaire was send to almost 22 government department/ academic institutions in Meerut District and received only 7 responses whereas questionnaire send to divyangian was 31 but responses received was 20 . Study sample was extracted randomly from adult divyangian.

RESULTS

Category -1

Since the responsibility under Fights of Persons with Disabilities Act, 2016 is mandatorily put on appropriate government; researcher main effort was to get feedback from government departments and government educational institutions. But few responses were also taken from private sector. (Table 1)

Table 1

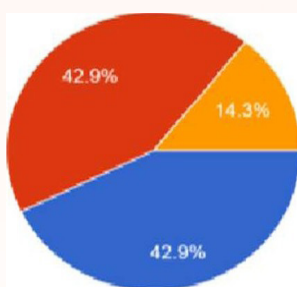
Category I (Respondents)	State / Central Government Department	State / Central Government Educational Institutions	Private Sector
Number of Responses	2	3	2

In the questionnaire for category I, eleven questions were asked in the light of responsibilities imposed on appropriate government to evaluate the implementation of those responsibilities. The results of responses are as follows-

Figure 1

1. Have your institution/authority{ board taken any steps to utilise the capacity of persons with disabilities by providing appropriate environment?

7 responses



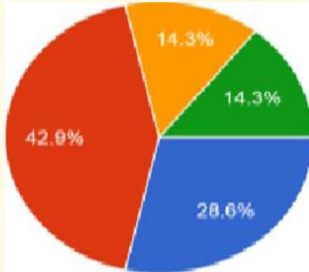
- e Strongly Agreed
- e Agreed
- e Agreed up to some extent
- e Not Agreed
- e Can't Say

When steps for utilizing the capabilities of divyangian was asked then 85.8% have consensus of taking such measures (either strongly or simply agreeing) and only 14.3 *1 have partially agreed of department/body d isagreed with it. (Figure 1)

Figure 2

2. Any special measures taken to ensure that the women and children with disabilities enjoy their rights equally with others?

7 responses



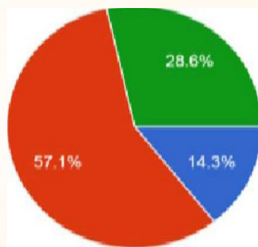
- e Strongly Agreed
- e Agreed
- e Agreed up to some extent
- e Not Agreed
- e Can't Say

When measures for enjoying equal rights of vulnerable group (women and children) were put than 71.5 % agreed (either strongly or simply agreeing) whereas 14.3 % partially agreed and only 14.3% did not agree. (Figure 2)

Figure 3

3. At least four percent of the total number of vacancies in the cadre strength in each group of posts with persons with benchmark disabilities?

7 responses



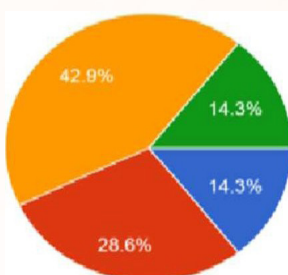
- e Strongly Agreed
- e Agreed
- e Agreed up to some extent
- e Not Agreed
- e Can't Say

When question for reservation in jobs for benchmark disabled (not less than forty percent) than the response 71.4 % agreed (either strongly or simply agreeing) but 28.8% did not agree with this. (Figure 3)

Figure 4

4. Reservation in promotion provided by your establishment to persons with benchmark disabilities?

7 responses



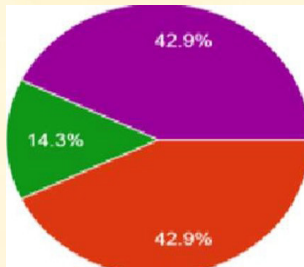
- e Strongly Agreed
- e Agreed
- e Agreed up to some extent
- e Not Agreed
- e Can't Say

When reservation in promotion for benchmark disabled person was asked 42.9% agreed (either strongly or simply agreeing) and 42.9 % partially agreed whereas 14.3% disagreed. (Figure 4)

Figure 5

5. Within the limit of your economic capacity and development, your establishment provide incentives to employer in private sector to ensure...is composed of persons with benchmark disability?

7 responses



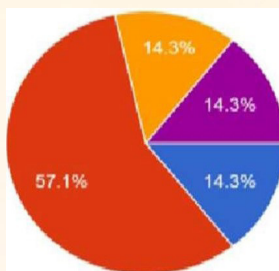
- e Strongly Agreed
- e Agreed
- e Agreed up to some extent
- e Not Agreed
- e Can't Say

When question for incentives by govt. establishment to private entity was asked then 42.9% agreed, 42.9% could not say anything about this and 14.3% did not agree to it. (Figure 5)

Figure 6

6. Your establishment made schemes in favour of persons with benchmark disabilities?

7 responses



- e Strongly Agreed
- e Agreed
- e Agreed up to some extent
- e Not Agreed
- e Can't Say

When question on scheme made for benchmark disabled was put then 71.4% agreed (either strongly or simply agreeing) 14.3% partially agreed and 14.3% could not say anything (Figure 6)

DISCUSSION

Present study was aimed to see that after coming of new law in the year 2016 for differently abled persons has it changed their position in society or they are still facing discrimination in different walks of life.

Results of the study reveals that when seen in the light of the responses received from Category I it seems that appropriate government has made good efforts in bringing equality, utilizing capabilities of differently abled persons, promoting & conducting awareness campaign, making disabled friendly, provided incentives to private players, gave reservations but efforts in CCT are still required.

But this is only one side of the coin. When responses from category II are dissected, it reflects a different image. Most of differently abled persons do not feel themselves as equal with others but in terms of financial freedom the responses were better. There is lack of awareness among differently abled persons regarding their rights, punishment for atrocities with them, DM as limited guardian and established district level disability committee. Feedback also points that despite Accessible India Campaign (Sugamya Bharat Abhiyan) important verticals of implementation, namely the build environment and the transportation sector are not yet accessible much but JCT ecosystem is better managed (Majority of respondents were locomotor disabled).

There are certain benefits a I so received by some respondents like free school education , reservation i n higher education and in employment . Certain areas like encouraging sports talent, creative and artist ic ta lent , loans to disabled are to be worked properly.

CONCLUSION

Divyangjan are like dia monds in the mine which are yet u nexplred. We must analyse the impact of divyangja n as source of immense potential. here is very important question that we must ask that what is the impact of d isabled on economy of the country ? Have we developed

any mechanism to polish the special abilities of divyangjan? Cf yes , is it working and if no than what shou ld we do and find the gaps. Just pay ing attention to the statutory duties under the Act in a cursory fashion is not going to be fruitful. After doing this study it is realized that society has out rightly rejected differently abled. We all ha ve to come out of this mental d isabili ty drnt we as society have developed probab ly than we wi ll have more inclusive society.

Higher Education Policies in India for Persons with Disabilities: Building an Inclusive Ecosystem in Higher Education Institutions



सामाजिक न्याय संदेश सदस्यता कूपन

मैं, डॉ० अम्बेडकर अंतर्राष्ट्रीय केंद्र द्वारा प्रकाशित त्रैमासिक पत्रिका "सामाजिक न्याय संदेश" का ग्राहक बनना चाहता/चाहती हूँ/शुल्क; वार्षिक सदस्यता शुल्क ₹ 200/ डिमांड ड्राफ्ट

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Dr. Ambedkar International Centre at 15 Janpath, New Delhi. Invited Public Policy and Disability issues and Challenges Various subject matter experts, related to policy makers, research papers and policy papers to celebrate the. Invites suggestions for all round development of Divyangjan people through Research Paper.

The DAIC was inaugurated by the Hon'ble Prime Minister of India Shri Narendra Modi on 7th December 2017. As per the announcement of the Hon'ble Prime Minister this Centre is be a Centre of Excellence for study, research, analysis and Policy making in the field of Socio- Economic Transformation. The main focus of the Centre will be to reduce Socio-political and economic inequalities by conducting rigorous and authoritative research.

Right to Person with Disabilities Act -2016

- | | |
|------------------------------------|---------------------------------------|
| 1) Leprosy Cured Person | 11) Specific Learning Disabilities |
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| 3) Dwarfism | 13) Mental Behaviour (Mental Illness) |
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| 5) Acid Attack Victims | 15) Haemophilia |
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| 8) Deaf | 18) Parkinson's disease |
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| 21) Low vision | |

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Organisers

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Associate Professor

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Dec 15, 2022
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Page number and caption of the figures and diagram are need to be placed properly. Page number are to be placed in the upper right hand corner of every page.

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