

Department for Empowerment of Differently Abled and Senior Citizens,
Government of Karnataka, honoured Mobility India with a State award in 2017,
in recognition of its unique work in the field of disability.

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About Mobility India



Mobility India (MI) a Registered Society was founded in 1994. MI has been a progressive force in the disability development and rehabilitation sector. MI provides and facilitates equitable access to quality, affordable rehabilitation services with a wide range of assistive devices such as prostheses, orthoses, wheelchairs and development and mobility devices with therapeutic interventions as per the individual needs with a gentle humanitarian touch to improve quality of life. Rehabilitation services improves health for individuals and communities and provides social and economic benefits and ensures respect for human rights and is firmly identified as the target of Sustainable Development Goal 3: Ensure healthy lives and promote wellbeing.

The Rehabilitation Research and Training Centre established in 2002 spearheads all the activities in Bangalore and is a model for accessibility and disabled-friendliness. MI has an office in Guwahati, Assam and field offices for community projects across urban slums in Bangalore, Jigani, Anekal Taluk and Chamarajanagar District in Karnataka. MI a training institute recognized by Rehabilitation Council of India (RCI) and has been conducting different levels of long term training programs in Prosthetics and Orthotics, Rehabilitation Therapy and short term trainings in Wheelchair Service Training Package for Basic, Intermediate and Manager Levels as well as Training of Trainers according to WHO guidelines. The trainings are recognized by RCI and International Society of Prosthetics & Orthotics (ISPO) and affiliated to Rajiv Gandhi University of Health Sciences (RGUHS), Karnataka. MI is the only Prosthetic and Orthotic school in India to receive ISPO CAT II status.

MI collaborates and networks with UN agencies such as WHO and international agencies like ISPO and ISWP and with leading institutions and Universities both National and International organisations like ICRC, CBM, IIT Madras, IIT Bombay, IISc and DEBEL (Ministry of Defense, GOI) etc.

MI supports grassroots organisations working in disability in urban and rural areas, thereby building their capacities. MI contributes to the strategies that are framed at the national and international level.

Over the last 24 years, MI's activities have reached South, East, North-Eastern States of India and middle income countries. MI aims to promote and achieve the SDG 1: Eradicate poverty targeting the most vulnerable. SDG 3: Good health and well-being, SDG 4: Inclusive and Equitable Quality Education for All, SDG 8: Promote sustainable economic growth and Livelihood Opportunities, where persons with disabilities and their families are included in the mainstream societies and have access to education, employment so that they can be financially independent and self-sufficient and have equal access to opportunities and services and live a dignified life.



Governing Body Members



Mr. Charles Prabakar

President
Practicing Chartered
Accountant



Dr. (Mrs.) Elizebeth Thomas

Vice President
Educational Consultant



Mr. K. L. Vinaya

Member
Retd. General Manager
NABARD



Mrs. Romola Joseph

Secretary
Professional Social Worker



Dr. A. K. Mukherjee

Member
Director General
Indian Spinal Injuries Centre
New Delhi



Mr. Sheshadri Nagaraj

Treasurer
VP (HR and Finance)
Jurang Consultants
(India) Pvt. Ltd.



Dr. Sujatha Srinivasan

Member
Associate Professor
Department of
Mechanical Engineering
IIT Madras



Ms. Albina Shankar, Director, MI receiving the award from the Former President of India Shri. Pranab Mukherjee

Mobility India is the recipient of the National Award For 'Outstanding Work In The Creation of Barrier Free Environment For Persons With Disabilities' by the Ministry of Social Justice And Empowerment, Department of Disability Affairs, Government of India, in 2014.

Vision

An inclusive and empowered community, where people with disabilities, their families and other disadvantaged groups have equal access to education, health, livelihood and enjoy a good quality of life.

Priority

People with disabilities, especially the poor, children, women and older people.

Mission

- Assisting poverty reduction.
- Promoting inclusive development.
- Facilitating access to services related to rehabilitation and assistive devices.
- Developing appropriate human resources in the field of Disability, Development, Healthcare, Rehabilitation and Assistive Technology at national and international levels.
- Capacity building of grassroots organisations in the field of Disability, Development, Rehabilitation and Assistive Technology.
- Research and development of appropriate Assistive Technology and improving its access at an affordable cost.
- Realising the aspirations of the Convention on the Rights of Persons with Disabilities (CRPD), Incheon Strategy to 'Make the Right Real' for persons with disabilities and all related National Legislations.

Core Values

- Respect
- Honesty
- Innovation
- Safety
- Quality



President's Message

I bring greetings from the Board of Mobility India, staff and on my own behalf.

Mobility India was born about quarter century ago with Mr. Chapal's great vision who is at present serving the World Health Organisation. This indeed is a great movement for the persons with disabilities. It is a wonderful feeling to be a part of Mobility India for decades.

Reaching out to the persons with disability has been the motto of Mobility India all along and today it has grown from strength to strength both at the national and global levels.

Mobility India has won recognition and several awards from the State and the President of India as well.

Mobility India's partnership and collaboration with leading corporates, United Nations, other International Agencies and with several organizations having similar objectives proves that the institution is truly rising beyond limits. We would like to record and appreciate the support such like-minded organisations are extending to Mobility India so far and further.

This silver jubilee year, Mobility India is committed to reaching out to people in the North-Eastern states and developing countries.

I thank all the stakeholders of Mobility India for their valuable support and inspiration that has brought us thus far in reaching out to the unreached. The legacy of Mobility India will move on in the years to come.

With Best Wishes

Charles Prabakar

President



Director's Message

Mobility India steps into the 25th year.

It is a matter of great pride to see Mobility India (MI) growing from small and humble beginnings in 1994 to the organization it is today and **Karnataka State Government recognising and awarding Mobility India of rendering best services in the sector.**

MI has worked tirelessly towards its vision of providing education, health care services, livelihood opportunities and empowering people with disabilities to realize their maximum level of potential, sustainable independence as contributing, responsible and equal participants in society. MI has progressed towards its seven-point mission and together with the support of Board members, we embraced a good value system of respect, harmony, innovation, safety and quality and principles of mutual support with respect to each one and to respect people's abilities.

Disability will be of a greater concern because its prevalence is on the rise with the ageing population. One out of every seven people today lives with some form of disability, and the requirement of assistive technology is growing. Today, emerging technologies and the rising needs and expectations are reshaping the way we work with increased awareness creation. In other words, these technologies can make Sustainable Development Goals a reality, bringing social change and improving people's lives.

MI provides rehabilitation and support services through innovative and appropriate technology which is responsive to the needs of the people, accessible, equitable and affordable to the local community thereby enabling an inclusive environment. MI imparts professional education in the health care sector to deliver quality rehabilitation care. It enabled research and evidence-based practice and created inclusive policies and programs for the benefit of people with disabilities and the wider community and fostered national and international collaboration.

MI's work in Guwahati is taking good shape; promoting community based inclusive development programs for reducing poverty through disability inclusion. The interventions in 85 villages of four Gram Panchayats have helped the people of the region to access their rights and entitlements and avail better health care.

I would like to extend gratitude and thanks to our donors, sponsors, supporters, clients and friends around the world. On our 25th anniversary we reaffirm our commitment to the cause we have championed all these years and we look forward to working together to realise the 2030 United Nations Agenda for Sustainable Development and its commitment to leaving no one behind and our driving vision of creating an inclusive world, in which we are all able to live a life of health, comfort, and dignity.

Warm regards

Albina Shankar

Director



Health Care Services and Assistive Technology



Equitable Access to Quality and Affordable Rehabilitation Services

Sustainable Development Goal (SDG) 3 is to ensure good health and well-being for everyone. Rehabilitation services play an important role in achieving this goal and also other SDGs - access to education and jobs, alleviating poverty, equal access to opportunities and services and participation in society on an equal basis. Rehabilitation is a part of the universal health coverage.

The primary purpose of assistive products is to maintain or improve the functioning and independence of an individual, thereby promoting his/her well-being. Assistive products are essential tools to compensate for an impairment or a loss of intrinsic capacity, to reduce the consequences of gradual functional decline and need for care givers, primary and secondary prevention, and to help rationalise health and welfare cost, without which people with disabilities and others in need are often excluded, isolated and steeped in poverty.

With an ageing population and the increasing incidence of non-communicable diseases rising, many older people need two or more devices as they age. Hence the number of people requiring assistive products is likely to increase. Those who need assistive technology include persons with disabilities, older people, people with non-communicable diseases and those with gradual functional decline.

User-Centred Service Delivery

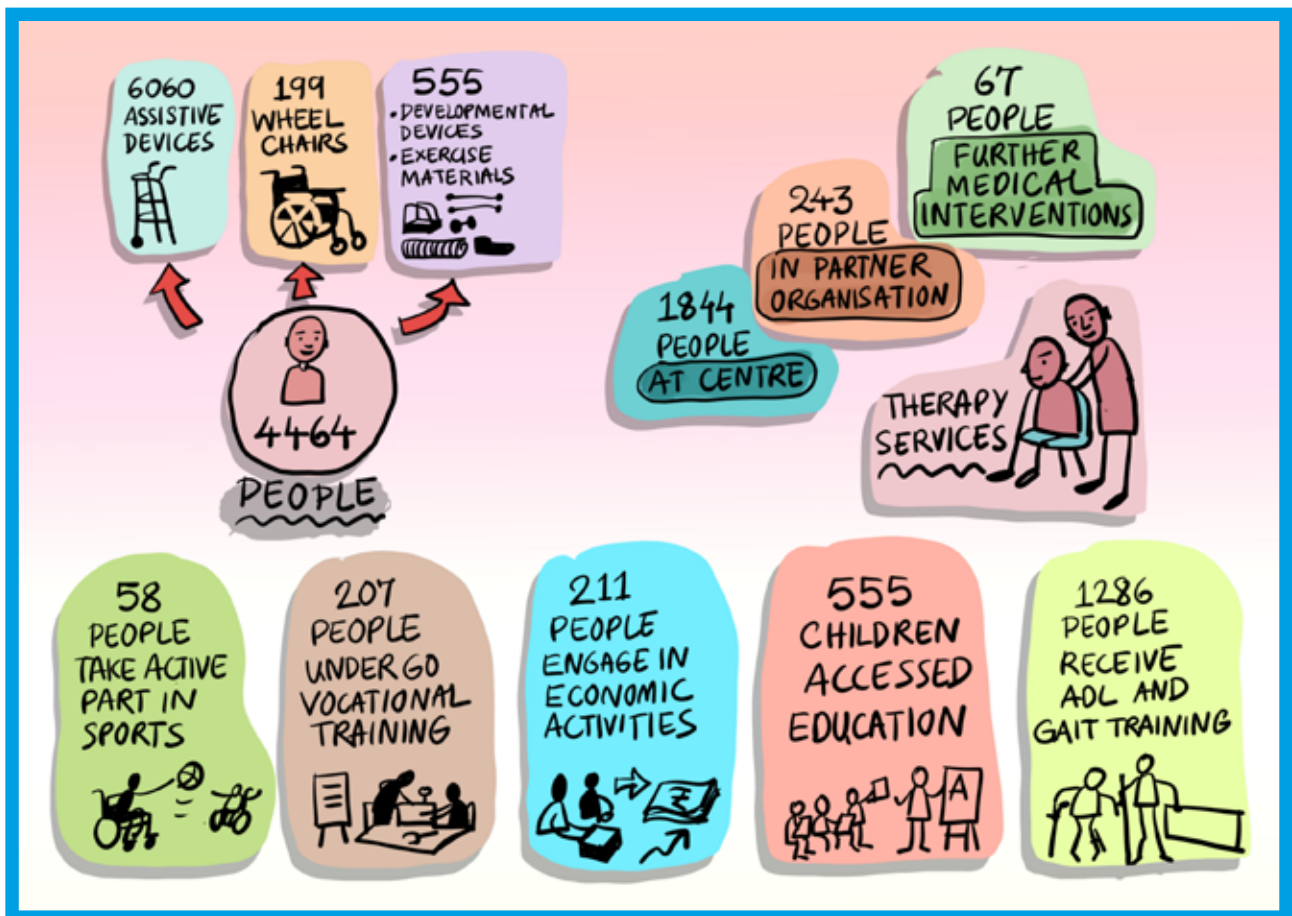
Since its inception, MI has been working towards improving access to assistive technology, its availability and accessibility of appropriate assistive products for all people in need.

MI has a multidisciplinary approach through provision of assistive devices such as prostheses, orthosis, wheelchairs, developmental and mobility devices, with guided gait training and planned therapeutic interventions that are innovative and affordable, especially for those who are poor and disadvantaged.

The services are people-centred and adopt the perspectives of individuals, families and communities. Thus, the individual user's needs and preferences that give credence to their dignity, choices and rights are central to the planning of services.

The Physiotherapy and Occupational Therapy Services render a wide array of therapeutic interventions for conditions such as cerebral palsy, developmental delay, muscular dystrophies, spinal cord injuries, amputations as well as developmental coordination disorders. The scope of activities enables people to lead a healthy, productive, independent and dignified life, thereby enabling them to participate in education, employment and social life.

Health Care Services and Assistive Technology



Unique Life Enhancement Technique



Nearly four to five million children in India experience developmental delay due to Cerebral Palsy and an array of other neurological conditions. Most of these children (70%) live in rural and remote places, with limited access to appropriate healthcare solutions and products.

Children with sitting and standing difficulties are mostly in lying position. Initially the approach which MI followed had two separate devices for sitting and standing position. The families shared their concern regarding the non-affordability of two devices, lack of space and replacing them every six months to one year, as the child grew.

To address this, MI in collaboration with a team of professionals with technical prowess designed a 'Twin Device' that performs both the functions of standing and sitting to cater

to the existing and prevailing need of children with developmental difficulties. The device is prefabricated with adjustable features that allow its modification, as the child grows. The device helps in feeding, postural control, prevents muscle contractures and deformities, improves eye contact and in achieving other milestones. It is cost-effective, durable and can be used for three years. It saves time for the parents and enables them to involve in income generation activities.

The Twin Device technology has earned accolades and appreciation from various technical fora, users as well as family members and has created a lot of interest amongst people, due to its simple design and easy adjustability, keeping in mind the needs of a growing child.

MI is currently working on an environmental friendly version of the Twin Device. It will be made using recycled plastic – wood composite and is still in its initial stages of development.

Group Play Therapy for Creative Development

Play therapy with small groups of children and older disabled people can be a very effective way of addressing many issues such as low self-esteem, social skills or difficulties in communication.



Play therapy sessions last for four hours and are held in a safe, learning and supportive environment for 8 - 10 service users (cerebral palsy, muscular dystrophy, spinal cord injury, amputation and neurological issues) and they are conducted every month with varied themes such as sensory organs, coordination-balance or endurance.

Group play therapy enhances the physical abilities, cognitive functional levels and emotional needs, improving their communication skills and build relationships. New methods of therapy have been created, not merely through the conventional method, but by making the entire experience rejuvenating and relaxing.



Introduction

Many people, mostly the elderly and people with disabilities are in need of one or more assistive products such as canes and sticks, crutches, standing frames, walking frames, walkers etc., and mobility devices like wheelchairs, prostheses (artificial limbs and hands) and orthoses (braces and splints), to name a few. According to an estimate of the World Health Organization (WHO), one out of 10 people in need of assistive products have access to them.

Despite greater need, low and middle-income countries have huge workforce shortages in rehabilitation and assistive technology. Three-fourths of the low-income countries have no prosthetics and orthotics training programs. The gap between the need and availability of trained professionals is on the rise. Access to rehabilitation and assistive devices remains a challenge.

To meet the demand of national and other low and middle income countries and ensure that people in need have access to services, MI has been developing a workforce in the discipline of Prosthetics and Orthotics and Rehabilitation Therapy at varied levels, since 2002.

The education pathway was planned as a continuum, so that professionals could continue to higher levels, thus allowing talented, dedicated technicians to progress to clinical positions with greater responsibility in their respective workplaces. Scope for skill upgradation in varied technologies such as wheelchair service provision was introduced.

Over the years, 1,015 trained professionals from India as well as 27 low and middle income countries have been working in National Institutes, NGOs, Rehabilitation Centres, Hospitals, Clinics, Academic Institutions, Multinational Companies and Private practice.



Education Courses at MI

Long-term

Bachelors in Prosthetics and Orthotics - 4 ½ years * ISPO CAT II in Prosthetics and Orthotics - 3 years
Rehabilitation Therapy Assistant - 1 year **

Short-term

WHO Wheelchair Service Training Package (WSTP) level – Basic, Intermediate, Managers and Stakeholders

Training of Trainers: Basic and Intermediate

* Recognized by the Rehabilitation Council of India and affiliated to the Rajiv Gandhi University of Health Sciences, Karnataka

** Recognized by the Rehabilitation Council of India

Education in Prosthetics and Orthotics is a combination of theory and practical training in health science and engineering. Prosthetics and Orthotics course is on the principles of formulation of treatment, designing, fabrication and fitting of assistive devices, developing plans for the evaluation of fitting, function and follow-up procedures. The course also provides an opportunity for:

- Supervised practice placements in rural areas to further develop practical skills
- Managing Prosthetics and Orthotics Clinics
- Carrying out evidence based practice

Mobility India
is the only
Prosthetics and Orthotics School
in India to acquire ISPO
accreditation of CAT II.

Realisation of a Dream



Ms. Nedarokoi, a 20 year old, hails from a 12 member family in Madan village, Karbi Anglong District, the largest administrative district in Central Assam. Nedarkoi's parents do agricultural work. Her village has poor transport connectivity and she had to trek four km. every day to school. This did not deter her from successfully completing her schooling upto 10th standard. Being a bright student, she was keen on pursuing higher education. The medium of instruction was Hindi and Assamese at the college; unfortunately, language was a barrier for her to attend college, since her mother tongue was Panar. She decided to study at home and successfully completed her 12th standard.

She came to know about the Rehabilitation Therapy Assistant (RTA) course through MI's Inclusive Development Centre at Guwahati . Keen to enhance her job opportunities and support her parents financially, she signed up for the RTA course at MI, Bangalore. Her persistence in studies reflected in her academic achievements and enhanced scorecards. She joined MI's Inclusive Development Centre - Guwahati, Assam.

For outstanding performance in academics and overcoming multiple barriers, Ms. Nedarokoi was conferred with Jo Millar Memorial Award 2017. After successful completion of the course, she is providing appropriate assistive products and therapeutic interventions in her village.

Enabling Environment towards Effective Wheelchair Service Development

Access to appropriate wheelchairs not only enhances mobility, but helps in getting access to opportunities in education, livelihood and social life. It also improves the physical health and quality of life of the users. Prescription of appropriate wheelchairs has to be done as outlined in the WHO guidelines through proper assessment, fitting, and follow up. However, the distribution of wheelchairs is often done without adhering to these guidelines. This is due to lack of awareness and lacunae in providing information to health care professionals during their course of training.

To address the gaps, MI implemented a project entitled Accelerating Core Competencies for Effective Wheelchair Service and Support (ACCESS) to ensure that the people with mobility limitations are able to access appropriate wheelchairs provided by qualified service providers. The project jointly supported by World Vision, United States Agency for International Development (USAID) and John Snow Inc. Research and Training Institute was implemented during 2014-2017.

As part of the initiative, the staff of World Vision were oriented on the systems, fabrication procedures, rehabilitation facilities, documentation and human resources involvement for rehabilitation of persons with disabilities. The World Vision staff were able to visualize the integral approach of therapy, prosthetics & orthotics and wheelchair services along with provision of other assistive mobility devices under one umbrella.





First piloting of Training in Assistive Products (TAP) Package, WHO of walking aids and reading glasses module



The training aims to support global efforts to increase access to assistive technology and support users with readily accessible information about basic assistive products. This is done through equipping community level workers with knowledge and skills to enable them to provide a range of basic assistive products.

TAP covers four key steps of service provision - assessment, fitting, user training and follow-up. Each online training module supports personnel in learning how to help those who use assistive products to select and use the most appropriate devices, as well as to provide an ongoing, quality service when maintenance or repairs are needed.

The first pilot training was conducted from 27 February - 2 March 2018 in partnership with Bangalore Baptist Hospital. 28 participants from MI, Primary Health Care Centres - urban and rural, Government of Karnataka and Bangalore Baptist Hospital attended the online and practical training.

Continuing Rehabilitation Education Program



Continuing professional development is important for service providers, to maintain, update and further strengthen their competence at all levels. In addition to improving the quality, effectiveness and efficiency of the services, it also ensures inclusion of new developments in clinical and technical practices, including new technologies.

MI organized three workshops during the year– one on 'Research Methodology and Data Analysis' and two on 'Developmental Devices and Service Provision'.

'Research Methodology and Data Analysis' workshop was conducted from 2-4 November, 2017 at MI. Dr. Arockia Raj, Assistant Professor, Sacred Hearts College, Vellore was the resource person for this workshop. 17 participants from diverse technical backgrounds - P&O, PT, PMR specialists and special educators attended the workshop. The workshop helped the participants to understand the concepts of research, methodology and using Statistical Package for Social Sciences (SPSS) software for statistical analysis.

A workshop on 'Developmental Devices and Service Provision' for Children with Developmental Disorders was organised at Bangalore and Srinagar from 29 - 31 August 2017 and 21 - 23 November 2017 respectively. 30 professionals attended and gained knowledge on the new technology. The participants were provided information on the provision of positional devices for children with delayed milestones and developmental issues.



Research and Publications

MI, along with leading national and international researchers from Lund University (Sweden), Maynooth University (Ireland), IIT Madras, carried out clinical research for appropriate assistive technologies and were able to submit three papers for publication.

Magnusson L, Ghosh R, Randboell Jensen K, Göbel K, Wallen S, Jonsson J, Svensson A, Stavenheim R and Ahlström G, carried out a study in southern India to investigate Quality of life among persons with disabilities using assistive products. A research paper entitled 'Quality of Life of Prosthetic and Orthotic Users in India: A Case Control Study. BMC Health and Quality of Life Outcomes.' was submitted for publishing.

Ritu Ghosh, Vennila Palanivelu, Emma Tebbutt, Rebecca Brodmann carried out an impact assessment study of the Rehabilitation Therapy Assistant (RTA) training programme to identify the professional skills and development needs of the graduates working in India and Nepal. A joint paper entitled, 'A study of professional skills and development needs of Mid-level Health Workers (Rehabilitation Therapy Assistants) working in India and Nepal' was developed and submitted for publishing.

A study was conducted to determine the parents perceived effect on the usage of adaptive (seating and standing) positional devices on the lives of young children with cerebral palsy aged 2 to 14 years, and their families. The research paper entitled 'The Adaptive Positional Devices for Children with Delayed Developmental Milestone' developed by Soikat Ghosh Moulic, Riyaz Hussain was submitted to ISPO International Journal.



Community Based Inclusive Development



MI has a sound reputation in Community Based Inclusive Development (CBID) programs, that is person-centred, disability inclusion and community-focused. A twin track approach to development is followed in all five domains of CBR matrix viz., health, education, livelihood, social and empowerment. MI works towards improving access to quality rehabilitation services, assistive products, inclusive education and sanitation, through local governance, primary health care centre, local community schools and development of strong community structures such as registered societies, self-help groups, children's parliament, community education centres and disabled people's organizations.

Inclusive Education

Inclusive Education is MI's primary goal towards building an inclusive and empowered community. Education is the main pillar in human development and is important for children with disabilities and the most marginalised children to access to quality education in their local community schools. MI believes all children should be in school - hence early identification and early intervention of disability or preventable causes of disability is addressed, particularly for the most vulnerable children.

Sarva Shiksha Abhiyan, a government program provides free education for all children aged 6–14 years. The MI approach is to educate parents of children with disabilities and community on importance of education and as a Human Right.





MI supports and builds the capacity of school teachers and community tutors to accommodate children with disabilities in their class rooms.

MI has set up 142 after-school clubs/ community education centres in 140 villages. The children are enrolled in the education centres and the community tutors work with the children in a school-readiness curriculum. This equips them to cope with daily living activities and inculcates disability and age appropriate learning skills. Such education empowers the children to lead dignified lives with independence and access their rights to equal opportunity and participation.

Communities and schools are working together to enhance opportunities for all children to learn, play together to enhance children's wellbeing with and play together to enhance children's well-being

Inclusive Summer Camp



The summer camp aims to create an inclusive platform for children with disabilities and others to be creative and explore the potential leadership qualities in them for overall development and wellbeing.

A three day summer camp was conducted from 22-24 May 2017 in Chamarajanagar and 41 children (24 boys and 17 girls) participated. The theme was 'The Environment and its Protection' where the children were sensitised on protecting the natural environment for

the benefit of all living creatures. Children were made aware of the production of waste at home and outside, and the need to dispose it safely and its reusability. The importance of protecting trees and preservation and improvement of forests, lakes, oceans and animals was also stressed. Children with disabilities were encouraged to actively participate in expressing their abilities with the support of peer groups.

District Level Children's Parliament Program

Many current social challenges arise out of a lack of community participation in governance and the limited opportunities to address these issues. MI recognizes the importance of people's participation in self-governance and is educating, organizing, empowering and networking with the community to achieve this.

As part of these efforts, MI created Inclusive Children's Parliament and Children's Grama Sabhas for them to speak and address issues affecting their own lives and those of the community. The children are the influencers in decision making and policy changing within the local governance.



MI organized a District Level Children's Parliament Program in collaboration with Karnataka State Child Rights Observatory on 21 November 2017 in Chamarajanagar. Around 53 children from across the District participated.

The children shared information about the situation in the villages about drinking water and sanitation facilities, power situation and irregularity of Gram Sabha meetings.

Apart from these, practice of child marriage, superstitions and the impact of caste discrimination on children, improper implementation of Sneha Clinic (Health and Hygiene guidance program for Adolescence) in Primary Health Centre etc. were also discussed.

The President of Zilla Panchayat and Chief Executive Officer (CEO) assured the children that the issues raised would be addressed.

Rehabilitation Services in Rural Areas of Karnataka

Rehabilitation services in the health system require strengthening to provide quality affordable services to improve the quality of life of the under privileged. Rehabilitation not only ensures respect for human rights, but also improves health and provides social and economic benefits. MI collaborates with Rashtriya Bal Swasthya Karyakram (RBSK), an innovative initiative, which envisages child health screening and early intervention services, a systematic approach of early identification and link to care, support and treatment, which is a step towards – Health for All.

MI provides quality rehabilitation services in Chamarajanagar, peri-urban areas and Bangalore slums. The physical rehabilitation program at Chamarajnagar has a committed team of Prosthetist, Orthotist, Physiotherapist, Orthotic Technologist and Rehabilitation Therapy Assistants. Services are planned from the perspective of individual users and respond to her/his needs and preferences, respecting their dignity, choices and needs.



10 assessment and fitment programs were conducted, 688 people were provided with orthoses, prostheses, wheelchairs, developmental and other mobility devices. 368 people were referred for further medical interventions. Home based therapy is provided on regular basis and also through the therapy centres based at local community schools and PHCs.

- Nine eye screening camps were organized in collaboration with Aravind Eye Hospital, Vardhaman Jain Netralaya Hospital, Jigani PHC, Shankar Eye Hospital and Swabhiman Trust. 1261 members were screened and 146 people received spectacles and 72 members underwent cataract surgery
- MI in collaboration with SSA provided rehabilitation services, reaching out to 300 children between 6-16 years of age
- 103 Government school children received tetanus injections
- 200 people participated in the Dental Screening Program organized by DPO members in collaboration with Venkateshwara Dental College, Bannerghatta, Jigani Hobli.
- 100 visually impaired people were provided Smart Cane and Mobility Training
- 13 Health Awareness Programs were organized and 783 people participated. Topics included dengue symptoms and treatment, leprosy patient identification, nutritious and junk food, health and social security schemes, HIV, personal hygiene, disability, tuberculosis, ANC and PNC care and breast cancer.

Finding Independence

Divyashree, aged 21, lives in Doddrayapette in Chamrajanagar. She had congenital hip dislocation and underwent surgery for releasing the tightness of the adductor muscle. MI intervention started in 2007 and she was provided with assistive devices for her mobility. With this, she attended her regular schools and after school club classes at the Community Education Centre. She took active interest and participated in children focused activities. She completed her 10th standard, and with a desire to earn a degree, she appeared for her B.Com



exams and successfully completed it. She underwent a banking training course as well and developed leadership skills. Divyashree is working as a computer teacher at Chamrajanagar and contributing to the family's income. Today she is more independent and self-sufficient.

Swavalamban Health Insurance Scheme

Swavalamban Health Insurance Scheme was launched in 2015 by The New India Assurance Company limited, in association with Ministry of Social Justice, Department of Empowerment of Persons with Disabilities to provide affordable Health Insurance to the persons with disabilities.

Availing the benefits of this health insurance, 15 people underwent surgery for knock knee, muscle growth in inner ear, spine, cleft lip, cataract and ear.

Community Therapy Centres in Chamarajanagar

In order to reach people in need and improve access to therapy services, a system tailored to the needs and distribution of population was planned with careful consideration of resources available. Six Community Therapy Centres are operational at Santhamaralli, Chandakavadi, Kasaba and Haradanahalli hoblies of Chamrajnagar taluk. They are situated at the Primary Health Centres, local governance offices and at the primary school premises. Physiotherapist, along with the Rehabilitation Therapy Assistants provide therapeutic interventions, especially for children coming from far off villages. 306 people have availed the therapy services.

A Learning Experience



Sowbhagya is a five year old affected by Cerebral Palsy with Diplegia, and she is the only child and was born premature. When the MI team identified her, Sowbhagya had no mobility and was in a lying down position all the time. After regular therapy, her developments have improved along with her mobility. She is now able to independently carry out a few daily activities and is going to an Anganawadi School. Communication methods were taught to parents, friends and teachers; with this, her learning improved further. Sowbhagya is a motivated and happy child. She is also one of the most regular students.

Chiguru Angavikalara Okkootta



Chiguru Angavikalara Okkuta is a Disabled People's Organisation, registered as a Society in 2010 under the Karnataka Societies Registration Act – it has 1992 members. Chiguru supports members across the taluk to access government schemes, benefits and entitlements. The members are involved in small farming, goat/sheep rearing and dairy farming for their livelihood.

MI is working towards empowering and building the capacity of Chiguru on social inclusion and rights protection.

MI organized a three day workshop on Strategic Planning from 27-29 December 2017 for its board members. Representatives of District Disabled Welfare Office, Taluk Panchayat members, GP members, Inclusive Education Resource Teachers (IERTs) and representatives of local NGOs participated in the training.



International Day of Persons with Disabilities



The annual observance of the International Day of Persons with Disabilities aims to promote the rights and wellbeing of persons with disabilities in all spheres of society and development. The theme for the year 2017 was 'Transformation towards sustainable and resilient society for all'

- On the occasion of International Day of Persons with Disabilities, Government of Karnataka conferred State Level Award for Best services and Achievements in the Disability Sector to MI. The award ceremony was held on December 3, 2017. Ms. Umashree, Minister of Women and Child Development, Empowerment of Differently-Abled and Senior Citizens presented the award and Ms. Albina Shankar, Director, Mobility India received the award.
- Ms. Parvin Taj, mother of Reehan from Yarabnagar, received the Government of Karnataka Award in appreciation for taking care of her child with cerebral palsy.

Several events were organised at its project locations:

- Chiguru Federation - Chamarajanagar - in collaboration with District Legal Service Authority, District Advocates Association organized the program where 240 people with disabilities participated. Participants were informed about the benefits and entitlements available at the government level and on Rights of Persons with Disability Act 2016.
- Sneha Jeevi Angavikalara Samanvaya Okkuta, Jigani along with Venkatesh Dental College and Shankar Hospital marked the day by organising eye and dental screening programs. 200 people benefited.
- Janapriya Angavikalara Sangha, Attibele –organized a rehabilitation program and 250 people were provided with assistive devices, magnifier, hearing aids and developmental aids.

Seeking New Directions for Livelihood Opportunities

MI, in collaboration with AWAKE, organized a one day awareness program for 70 self-help group members. The participants were provided with information on different skill trainings and enrolment process, selection criteria, marketing, individual income generation activities and group activities.

Conquering Disability and Earning a Livelihood

Mala, aged 30 hails from Jigani, Anekal taluk. In spite of having post-polio, she completed her 2nd PUC. Her husband is a daily wage earner. MI provided her with a wheelchair that enabled her to carry out the chores at home. With support from the DPO members, she re-established the business of running the petty shop which was earlier closed due to a local issue. She is now independent and contributes to the income of her household. She is an active member of the Sneha Jeevi Angavikalara Samanvaya Okkuta and participates regularly in all activities.



Commendable Success

Given the fact that D. Manjula has low vision, her achievements are commendable. She joined MI in 2008 as a Community Facilitator in Attibele, Anekal Taluk.

For over a decade, she has supported and facilitated persons with disabilities and other disadvantaged groups to avail education, health services, skill trainings, livelihoods and social recognition. She played a key role in promoting Janapriya Angavikalara Sangha (Disabled people's organisation). Rakshana Vedike recognised her commendable efforts and felicitated her with an award.



Progress of Community Based Rehabilitation Programs (April 2017-March 2018)

		CBR Rural	Urban	Peri-Urban
HEALTH	Awareness Program	494	470	458
	General Health Camp	600	560	220
	Screening at School and Community	154	571	482
	Corrective Surgery	5	5	6
	Cataract Surgery	20	26	3
	Assessment	230	139	142
	Referrals	158	115	95
	Assistive Devices	427	127	134
	Home Based Therapy	324	96	54
	ADL Modifications	6	4	0
	Sanitation		0	17
EDUCATION	School Enrolment (Govt / Special School)		184	123
	Education Materials for Students	60	167	134
	Community Education Beneficiaries	1318	215	328
LIVELIHOOD	Disabled ID Cards	67	36	22
	Bus Passes	34	54	80
	Physically Handicapped Pension	38	24	76
	Income Certificate	158	46	52
	Two Wheeler Modified Vehicle	18	13	37
	Ration Card	39	18	23
	Widow Pension	33	21	46
	Old Age Pension	8	8	61
	Scholarship from Government & JBY	106	47	123
	Health Cards (Swalamban)	100	111	0
	Enrolled in Janashree Bhima Yojana	0	0	0
	Skill Development (PWDs)	23	7	48
	Skill Development (Family Members)	36	16	53
	Skill Awareness Program (PWD)	158	4	20
	Skill Awareness Program (Family)	287	66	36
	Self Employment (PWDs)	8	4	13
	Self Employment (Family/Community)	10	12	5
	Wage Employment (PWDs)	15	3	6
SOCIAL	Recreation	530	194	240
	Summer Camp	41	52	129
	Children Group	23	4	3
	Children with Disabilities	25	25	10
	Non-Disabled Children	32	32	24
	People with Disabilities	46	46	80
	Family	56	56	140
	Participation in Various Forums	1200	120	10
	Access Adult Training	0	5	0
	World Disability Day Celebration	680	25	547
EMPOWERMENT	Advocacy & Communication Issues			
	Self Help Groups	140	17	26
	People with Disability	1184	9	51
	Family Members	731	158	57
	Poor Family Members	36	54	348
	Disabled People Organisation	9	4	1
	People with Disability	113	42	14
	Family Members	33	8	4
	Capacity Building of DPOs	10	4	24
	Children Parliaments	1	1	2
	Capacity Building of Children Groups	165	2	2

Inclusive Development Centre - Guwahati, Assam



The North Eastern (NE) states of India lie in the eastern most region of the country. The population of NE (around 44.31 million in 2011) is roughly 3.6% of India's total population. There are an estimated 6.6 million persons with disabilities. About 70% of this population lives in the state of Assam, the most populous state of the region. Disability and Rehabilitation services are inadequate in terms of quality, coverage and awareness. Accessibility in all forms is a big challenge.

The north-eastern office of MI was established in Guwahati in 2015. An assessment of situation of persons with disabilities and rehabilitation services was carried out in the region. A disability survey called Rapid Assessment of Disability (RAD) was conducted; this helped in gaining an understanding about their needs and providing support for the new persons identified during the RAD survey in the Dimoria block of Kamrup (M) district of Assam. Based on the findings of the survey, MI promotes activities for community based inclusive development programs to address poverty through disability inclusion and promoting sustainable development by building inclusive communities in seven Gram Panchayats (GPs) of Dimoria development block.



Participatory Rural Appraisal (PRA)

PRA was carried out in 85 villages of four GPs of Dimoria Block namely Topatoli, Maloibari, Dhupguri and Khetri. It was conducted for finding out information about problems, needs and potentials in a village. 326 people were involved in the process of social mapping, resource mapping, focus group discussions and seasonal mapping.

The results showed that most of the families live below the poverty line and they are vulnerable both economically and geographically. The major problems faced by persons with disabilities and their families are -



- Limited access to disability certificates
- Limited awareness on government schemes/programs
- Poor participation due to barriers that exist in the community
- Limited healthcare and rehabilitation services
- Lack of qualified personnel resulting in the reduction of quality services and essential assistive products
- Non-existence of rehabilitation centres
- Limited access to schools
- Less income generation opportunities, skill training and employment.

The focus of MI is on creating awareness on disability, human rights, health care services and assistive technology at the community level. This helps in building self-help inclusive groups and facilitating community to access their rights and entitlements, access to health care services and provision of quality essential assistive products, livelihood opportunities, quality inclusive education in mainstream schools, child right promotion and accessibility.

MI aims at poverty reduction and creation of more accessible and inclusive communities of people with disabilities and their families in development process and programs through sustainable development for all.

Awareness and Sensitization Programs were organized from 22-23 August 2017 and 14-15 September 2017 at R&D centre, NEDFI, Khetri. 78 community members, health workers, Panchayat officials, members of disabled people organisations and teachers participated in these programs. The topics included disability inclusive development, prevention of disability, early intervention, need and benefits of assistive technology and inclusive education.

Prosthetics and Orthotics Repairs and Maintenance Workshop

In order to provide assistive devices for people in need, especially the poor, MI set up a workshop in Dhugpuri in December 2017. Four local residents of Assam were identified and trained at MI, Bangalore as Lower Limb Orthotic Technologists, Rehabilitation Therapy Assistants along with a Physiotherapist are providing rehabilitation services with the supervision and guidance of qualified and experienced rehabilitation professionals from MI, Bangalore.



Two assessment programs have been organized - 114 people were assessed and 159 devices have been provided so far. Home based therapy is being provided to 75 people with disabilities living in far off villages.

A one-day eye-screening programme was conducted in collaboration with Sri. Sankardeva Nethralaya. Out of 70 people screened, 14 had cataracts, 17 persons were referred for further medical intervention and 24 persons were diagnosed with Refraction Error.

A one-day screening and assessment was conducted for hearing impairment on 4 March 2018 at MI Inclusive

Development Centre in Guwahati. 24 persons were assessed and seven were provided with hearing aids.

Workshop on Child Safeguarding



MI is committed to improving the quality of life of people with disabilities, especially the poor. Children, who represent a significant number among the target group, have been addressed on a priority basis. Taking into consideration, the increased risk of abuse that children with disabilities face, MI ensures the safety of every child with whom it works.

MI's Child Safeguard Policy and code of conduct is based on the UN Convention on the Rights of the Child and Commissions for Protection of Child Rights Act 2005. Through this, MI promotes a child safe environment and to ensure protection of children from all forms of abuse. This is done by raising awareness, prevention, response and reportage. Assessment of Child Protection Policy, Child Safeguarding was conducted by members from CBM India, CBM Latin America and CBM International at MI, Guwahati on 23rd and 24th February 2018 and MI, Bangalore on 1st March 2018.



Rehabilitation Services Reaching at the Doorstep

Confidence Regained

Amrit Choudhury was a happy man working in a private company till 2014. He fell from a tall tree which crippled him waist below. This shattered his life and left his wife and children without a bread winner. His family was supportive but Amrit was bed ridden for almost three years which left him depressed. His wife had to take up a job to support the family.

MI team reached out to him in 2018 and he was assessed and provided home based therapy regularly. Gradually he was able to stand with support. Later he was provided crutches and bilateral AFO. He is able to walk and is confident that he will be able to explore a livelihood option to support his family.



A Transformed Life

Ms. Renu Kour, a 48 year old woman of Ulubam village, Khetri suffered spinal cord injury a decade ago, she has been paralysed from her waist down. Her husband is a cultivator and a daily wage earner. Due to her physical condition, her participation as a contributor to the family and in the community was restricted. She was confined to her home for a decade. Though she received a second-hand wheelchair for her mobility, it was not appropriate for her condition.

Renu was provided with the right kind of wheelchair by MI and trained in mobility skills.



The new wheelchair helped her regain the mobility she needed to move around. Renu's life has changed for the better, she is much more active now and is busy in gardening and hopes that she will be able to contribute to the family in better ways now.



Development of Assistive Devices-

An initiative of Make in India Campaign

Recognised as a significant contributor to the rehabilitation sector for the past 25 years, MI has had extensive clinical and practical experience in providing quality prosthetics and orthotics services suitable to varied settings. Designing and developing rehabilitation devices that suit the needs of people has been the hallmark of MI since its inception.

Over the years, MI has designed and developed many prosthetic, orthotic components, assistive products, tools and equipment that have won national and international acclaim, as well as wider user acceptance. MI has been working with leading institutions like IIT Madras, IIT Bombay, IISc and DEBEL (Ministry of Defence, GOI) to develop indigenous and affordable orthotics and prosthetic devices. MI is also supporting these institutions by conducting clinical trials to ensure the efficacy and functionality of the design.

Collaboration with R2D2, IIT Madras

R2D2 Prosthetic Knee Joint Clinical Trials- MI is supporting the development of the 4Bar linkage prosthetic knee joint designed by the lab. MI has conducted clinical trials of 11 amputees with trans femoral amputation in various settings and fitted them with prostheses with R2D2 designed joint. The clinical trials are to test the efficacy and functionality of the same and provide necessary feedback for design modifications if any. Six persons out of the 11 with amputations have been fitted with the prostheses from remote and rural regions of Andhra Pradesh.

Out of those 11 users provided with trans-femoral prosthesis as part of the clinical trials, two were using free knee joint and nine were lock knee joint in their older prosthesis. The outcome and the initial findings are very encouraging.

It was observed during the follow ups that the nine users who were using a locked knee joint prosthesis could do their daily living activities more efficiently with less energy consumption using the 4Bar linkaged knee joint prosthesis. They were able to do high activity tasks with better competencies. Three among them are able to ride two wheelers with confidence with the new knee, which was difficult with their old system.

This knee unit could be the first indigenously developed prosthetic knee joint system in the country.



Collaboration with Indian Institute of Science, Bengaluru

MI networking with Indian Indian Institute of Science, Bengaluru has been for significant development on myoelectric controlled below elbow prosthetic system of affordable cost, PURAK. The indigenous concept of this development is the brain child of the Centre for Product Development and Manufacturing (CPDM) researchers. Based on the clinical validation done for the first 5 prototypes specific inputs were provided to the research team of CPDM to incorporate certain iterations to make prescription to wider range of persons affected with below elbow amputations. The current year has seen lots of efforts from IISc team in getting the iterations done. Mobility India accepted the project requirement for conducting pan India clinical trials for the PURAK system and have submitted the details.

Standardisation of Assistive Products and Components

Rider 1 - Wheelchair

Wheelchair is the most widely used assistive device for locomotor disabling condition. The requirement and usage of wheelchairs often depends on the person using locomotor wheelchair. The Rider 1 wheelchair developed by MI, apart from its light-weight, foldable, stable and durable features has also additional adjustable features like seat width, depth, brake lever, foot rest and back rest. It is designed to suit the rural and rough terrain environment.

MI has developed the draft standards for Rider 1. The draft for national standardisation has been submitted to the sectional committee of Bureau of Indian Standards (BIS). BIS will review the standards and once approved, publish the details as a quality assured product with Indian Standardisation (IS) number for the country.

Standard Orthotic Knee joint

Orthotic Knee joint- standard-130 degrees flexion range- To meet the ever-growing need of orthotic users in the region, Mobility India has taken steps to design and develop standard stainless steel orthotic knee joint units in two sizes. The product after undergoing various mechanical tests, was deemed fit to have its national standards. MI developed the draft standards to establish the quality assurance for the orthotic knee joint unit and submitted the same with Bureau of India Standards for approval. The sectional committee is reviewing the details and could take a call soon on granting the national standard for the product and assigning the ISI number.

Networking and Collaboration



MI's networking activities span across international, national, regional and state levels. MI contributes to the guidelines and strategies that are framed. Since MI works at the grassroots level, knowledge transfer takes place and it is integrated as part of the strategy formed by various international agencies such as WHO, ISPO, ISWP etc. thereby functioning as the voice of the people from low income countries. MI also liaisons with other international agencies that have a strong root in the community. Apart from this, MI actively participates in several seminars, conferences and professional events at national and international level.

Wheelchair Stakeholders Meeting



The 2018 Wheelchair Stakeholders' Meeting brought together various stakeholder groups, including past and present USAID implementing partners, academia and other sector technical specialists, to reflect on past achievements and challenges, discuss current initiatives, and strategize for a future with greater access to appropriate wheelchairs.

From January 15 to 18, 2018, the Wheelchair Stakeholders' Meeting was held at Mobility India. The four-day event convened 56 participants and several representatives from the

United States Agency for International Development (USAID) to evaluate wheelchair sector priorities.

World Learning coordinated and implemented the meeting through the USAID-funded Special Programs to Address the Needs of Survivors (SPANS) Grant Solicitation and Management (GSM) project and the meeting was hosted by Mobility India.

The key outcome of the meeting was an overarching sector goal (measurable result) for the next five years and priority actions to achieve the goal. Participants collaborated within the following four thematic strategic areas - Policy, Provision, Personnel, and Products and to develop goals and priority actions related to each area.



Collaboration with Vellore Institute of Technology, Vellore

MI and VIT, Vellore will undertake joint research work in the areas of mutual interest; product development (rehabilitation assistive devices), research, personnel and technical information exchange, staff and student exchange program, formulate research projects and use of research equipment and facilities.

Staff Participation at International and National Conferences

- ISPO World Congress was held at Cape Town from 8 – 11 May 2017. Ms. Ritu Ghosh – Deputy Director – Training participated and presented papers on 'P&O Education and Services Provision in Conflict Countries of Southern Asia – Experiences of Best Practices/Learnings and Current Priorities' and 'Well-being of Persons with Disabilities using Lower Limb Assistive Devices in Low-income Countries'.
- A week long workshop on Orthotic Management was held at Bangladesh from 18-21 July 2017. Mr. Ashutosh, Sr. Clinical Trainer - Therapy attended the workshop.
- National Level Stakeholders Meeting on ACCESS Project organised by World Vision was held on 15 May 2017 at New Delhi. Ms. Albina Shankar, Director and Ms. Venilla, Manager Therapy Training participated in the meeting.
- A planning meeting for promotion of priority assistive products and technology was held at New Delhi on 16 May 2017. The meeting was organized by The Cradle, on behalf of WHO-SEARO and United Nations Information Centre. Ms. Albina Shankar, Director attended the meeting.
- A workshop on 'Manual Foot Assessment with Custom Padding and Wedging Techniques' was held at New Delhi from 9-10 Sept 2017. Workshop organized by Indian Pedorthic Association was attended by Ms. Hema, Trainer P & O and Mr. Sanniram, Clinical Trainer.
- A two- day Education Partners Meet 'Journeying Towards Inclusive Education' was organized by CBM from 1-2 November 2017 at New Delhi. Ms. Albina Shankar, Director and Mr. Anand SN, Sr. Programme Manager participated in the event.
- Short Course on Orthotic and Therapeutic Management of Stroke Patients was held at National Institute for Locomotor Disabilities, Kolkata from 2-4 November 2017. Mr. Kamaraj, Assistant Manager – P & O Training, Mr. Naveen, Prosthetist & Orthotist and Ms. Soumyashree Pati, Therapist attended the course organized by International Society of Prosthetics and Orthotics (SPO-NMS in India).
- Stakeholders Consultative Workshop on Managing disabilities: Role of Assistive Technologies (ATs) was organized at New Delhi on 14-15 December 2017. The workshop organized by ICMR (Ministry of Health and FW) with support from WHO was attended by Ms. Albina Shankar, Director.
- International Conference on Challenging Exclusion was organized at Chennai on 30 Jan - 2 Feb 2018. Ms. Ritu Ghosh, Deputy Director- Training and Mr. Rajdeep Kumar- Manager P & O Training attended the workshop organized by NIEPMD- Chennai.
- A workshop on Evaluation of need for Low-cost joints, prosthetics and rehabilitation technologies in India was organized at Vellore on 1-2 February 2018. Mr. Soikat Ghosh, Assistant Director – Rehab Services attended the workshop organized by LEEDS University, West Yorkshire, England.
- 56th Annual Conference of Indian Association of Physiotherapists (IAP) was held at Agartala, Tripura from 9-11 February 2018. Mr. Riyaz Hussain, Assistant Manager, Therapy and Ms. Soumya Pai, Physiotherapist attended the conference.
- International conference on Evidence in Global Disability and Health was held at Hyderabad on 26–27 February 2018. Ms. Mamta Kumari, Manager P&O Training attended the conference.

Corporate Social Responsibility

Accessible Mobile Vehicles

Svayam Foundation donated three specially designed retrofitted Maruti Eeco mini vans to facilitate easy and dignified commute for people with reduced mobility, such as elderly and persons with disabilities. These specially designed vehicles, come with a ramp for easy entry and exit, ceiling raised for higher head room and can accommodate three people apart from the driver. Two vans are at Bangalore and one at Guwahati office.



Cosmetic Restoration Unit

This is a specialized area where art meets science, the outcome being Prosthetic Innovations and Custom cosmetic restoration. Prosthetics restorations of body parts has been in practice since many decades now. Cosmetic restoration refers to the process of replacing a part of the body (usually smaller parts) with non-functional replacement with biological grade materials matching the colour, complexion, shape and ethnicity of a user. The prosthetists have been facing the issues of smaller replacements of body parts like fingers, toes, parts of foot, nose, eye sockets, ears and so on due to lack of technology and materials.

MI set up its own facilities with the support from Cognizant Foundation and Ms. Sudha Janardhan for providing cost effective cosmetic restoration solutions that is less time consuming and at an appropriate cost along with all the ranges of rehabilitative assistive devices.



Setting up of Prosthetics and Orthotics Lab

MI is engaged in training and equipping students with skills and expertise on the current trend and advanced technologies pertaining to rehabilitation services. To accommodate the emerging need, MI has set up a new P&O lab - a resource and practice laboratory for providing hands-on training to the students for the fabrication of assistive devices. The support was from Ms. Sudha Janardhan, Allergan Healthcare India and Mitsubishi Hitachi Power System.

Northern Trust	Provision of Assistive Devices for people in Karnataka and Andhra Pradesh
Allergan Healthcare India	Provision of wheelchairs
Ms. Sudha Janardhan	Provision of Assistive Devices
Inner Wheel Club of Bangalore and J. P. Nagar	Provision of Assistive Devices
Mitsubishi Hitachi Power System	Accessible Mobile Service Van, Ramp Modification, Tools and Equipment and Provision of Assistive Devices
S. J. Foundation	Provision of Assistive Devices and Therapy Services

MOBILITY INDIA

1st & 1st 'A' Cross, J.P. Nagar 2nd Phase, Bengaluru - 560 078.

RECEIPTS & PAYMENTS ACCOUNT FOR THE PERIOD APRIL - 2017 TO MARCH - 2018



(Amounts in ₹)

31-Mar-17	RECEIPTS	31-Mar-18	31-Mar-17	PAYMENTS	31-Mar-18
	To Opening Balances		480,86,370	By Personnel Costs	375,63,860
1,96,638	Cash on hand	1,33,316	111,99,516	" Administrative Costs	98,71,866
130,64,841	Cash at bank	134,22,060	100,12,409	" Rehabilitation Services	199,02,220
	" Fixed Deposits	251,61,511	107,89,488	" Capacity Building, Partnership and Seminar	62,43,638
	" Grants		79,63,114	" Design & Development of Orthotics & Prosthetics Components	62,34,071
268,48,674	- CBM	63,51,324		" Human Resource Development in Disability & Rehabilitation	87,52,639
11,85,324	- MIBLOU	17,50,016	72,69,014	" Community Based Rehabilitation Programmes	72,15,901
11,58,631	- World Learning	107,15,736	109,22,416		
83,68,265	- World Vision	7,74,930		" Capital Expenditure	61,76,376
4,41,353	- Zurich Community Trust (UK)	3,14,327	8,37,145	" Advances & others	62,13,948
90,374	- Abilis Foundation	-	44,43,441	" Fixed Deposits	213,29,873
	- Management Science for Health	3,03,821	70,82,608		
51,00,080	- International Committee of the Red Cross - New Delhi	27,15,598		" Closing Balances	
6,47,000	- Northern Operating Service Private Limited	5,25,000		- Cash on hand	77,878
	- World Health Organisation	93,985	1,33,316	- Cash at bank	167,33,627
	- Azim Premji Philanthropic Initiatives Pvt Ltd.	104,77,300	134,22,060		
19,20,607	- Handicap International	-			
6,00,000	- Jan Vikas Samiti	-			
10,20,672	- Allergan International Foundation	5,18,900			
15,00,000	- Australian Consulate - General	-			
	- Centre for Industrial Consultancy & Sponsored Research	2,11,130			
	- Mitsubishi Hitachi Power Systems India Pvt Ltd	6,00,000			
224,26,408	" Donation	191,49,200			
171,60,610	" Education Programme	252,60,293			
1,400	" Membership Fees	1,200			
126,02,725	" Orthotics & Prosthetics	162,10,264			
168,64,275	" Bank/FD Interest	74,64,287			
	" Misc Income/in Kind	30,87,152			
9,63,022	" Advances & Others	10,74,547			
1321,60,898	Total	1463,15,897	1321,60,898	Total	1463,15,897

As per our report of even date attached,

For Shankar Sridhar & Mukundh

Chartered Accountants

Firm Reg No. : 007273 S

Mukundh S

Membership No : 202437

Mr. Charles Prabakar
President

Ms. Romola Joseph
Secretary

for Mobility India

Mr. Seshadri Nagaraj
Treasurer

Ms. Albina Shankar
Director

Place - Bengaluru

Date - 30 June, 2018



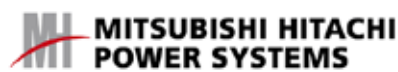
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Volunteers And Individuals

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1. Online Payment

<<https://www.onlinesbi.com/prelogin/icollecthome.m?corpID=382091>>

2. NEFT- Donors from India

Bank Details

Bank Name : State Bank of India
Account Name : Mobility India
Account Number : 30264303319
Branch : Jayanagar 2nd Block
Location : Bengaluru
Address : # 40/2, Pattalamma Temple Road, Opp. A. V. Hospital
Near South End Circle, 2nd Block, Jayanagar,
Bengaluru, Karnataka 560004
IFSC CODE : SBIN0003286
SWIFT CODE : SBININBB423

3. NEFT- Donors from Overseas

Bank Details

Bank Name : Canara Bank
Account Name : Mobility India
Account Number : 0883101061230
Branch : Sarakki Layout Branch
Location : Bengaluru
Address : No. 727, 46th Cross, 8th Block, Jayanagar,
Bengaluru, Karnataka-560070
IFSC Code : CNRB0000883
SWIFT Code : CNRBINBBLFD
IBAN No. : DE 52500800000806304711

4. Donate through a Cheque /DD

The Cheque /DD should be in the name of "MOBILITY INDIA" payable in Bangalore.

All the donations received from Donors from India are eligible for Tax exemption under section 80G of IT Act

For any queries or any **further information contact**

Mobility India

Fund raising Unit @ 26492222/4444 ext 120 or fru@mobility-india.org



MOBILITY INDIA

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idcrojmgr@mobility-india.org

CBR Centres
Chamarajanagar District
Bengaluru Peri-urban - Jigani, Anekal Taluk
Urban Slums Bengaluru (All major slums)

www.mobility-india.org