

# Annual Report April 2020 - March 2021











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## **About Mobility India**

Mobility India (MI), a Registered Society established in Bangalore, committed to Inclusive Development and Social Inclusion in the disability, development, rehabilitation, and AT sector since 1994 and has reached South, East, North-Eastern States of India and middleincome countries while combating the perpetual cycle of poverty and disability.



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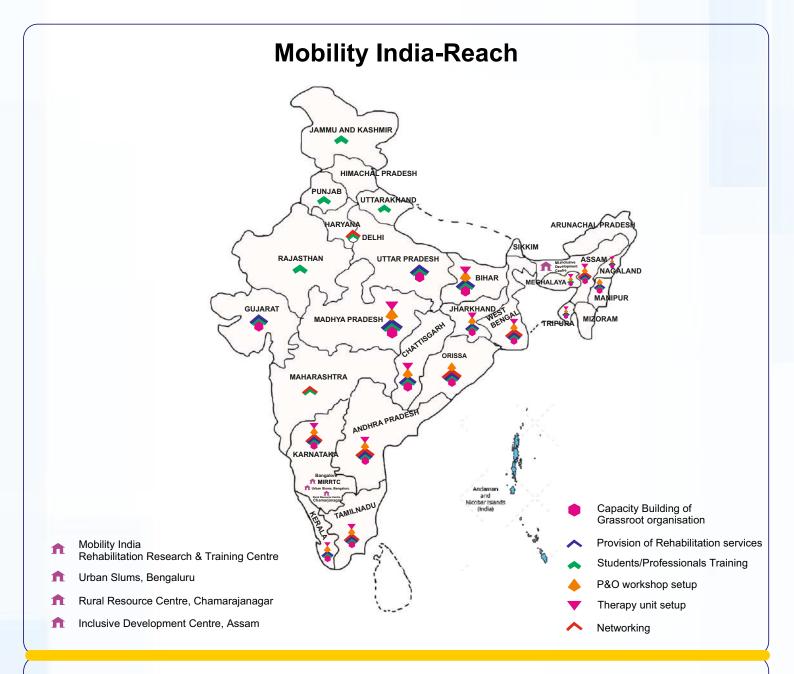
MI aims to promote and achieve SDG 1: Eradicate poverty targeting the most vulnerable. SDG 3: Good health and well-being, SDG 4: Inclusive and Equitable Quality Education for All, SDG 5: Gender Equality, SDG 8: Promote sustainable economic growth and Livelihood Opportunities, where persons with disabilities and their families are included.

The core strengths are Rehabilitation and Assistive Technology services coupled with the latest technology with therapeutic interventions, Innovative Product Development. Education and Research- certificate to university level for allied and health care personnel in 25 states of India and 33 countries and the only P&O training school in India which has a curriculum recognized by the International Society of Prosthetic and Orthotic (ISPO) and its courses are recognized by Rehabilitation Council of India and affiliated to Rajiv Gandhi University of Health Sciences. Active, from the grassroots, regional to national and global levels of engagement. MI has also worked with 350 grassroots organizations by focusing on less resource settings. Its approach is person-centered and forms strong inclusive community structures through its Community-Based Inclusive Development programs thus promoting sustainable development. Academic research, awareness-raising, networking, and collaboration and framing health care, inclusive education, and development strategies at national, international, and global levels.

The Rehabilitation Research and Training Centre established in 2002 spearheads all the activities in Bangalore and is a model for accessibility and disabled-friendliness. The north-eastern office, Inclusive Development Centre (IDC) of MI was established in Guwahati in 2015 in Dimoria block, Kamrup (Metro) District, Assam. The community-based inclusive development field offices are in Chamarajanagar District in Karnataka.

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

Mobility India mainstreams gender, disability, human rights, and inclusion in its staffing, services, and capacity development programs. MI team is comprised of 117 (52% W, 43% PWDs).





## **GOVERNING BODY MEMBERS**



### VISION

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

### MISSION

- Assisting in 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 organizations in the field of Disability, Development, Rehabilitation and Assistive Technology
- Research and Develop appropriate Assistive Technology and improving its access at an affordable cost
- Realizing 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.

## PRIORITY

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

## **CORE VALUES**

- Respect
- Honesty
- Innovation
- Safety
- Quality

## **Message from the President**

The world is in unprecedented turmoil from the outbreak of the COVID 19 pandemic early in 2020 and had a massive impact on individuals, communities, and all our lives. The lockdown period due to the Covid-19 pandemic was uniquely challenging. Mobility India stands for its strong values and the relentless focus on its stakeholders and being a pioneer in the field of disability development and rehabilitation took this challenge by mitigating the suffering of the most vulnerable population; the poorest of poor in the



community; children and people with disabilities and their families through its services.

Beginning of the year, we were very optimistic with our financial forecasts, fund inflows, and varied programs for the year. As months went by, in the prevailing scenario, there was more anxiety and we had to ensure our decision-making is robust. Some of them were difficult and required close monitoring, all our services and policies were redesigned to the impacts of COVID-19. Given the depletion of our slim resources, it became imperative that we optimize our programs and plans to remain in line with our sources of funds.

I must acknowledge with gratitude, the governing body members, especially the office bearers with their expertise met more frequently to oversee the finances, the training, programs, and certain measures were taken for the wellbeing of the organization and all its stakeholders. Few cost-cutting measures had helped Mobility India face the financial brunt of COVID.

I wish to compliment Ms. Albina Shankar, Executive Director, and her entire team who worked tirelessly despite several hardships during the pandemic, and with the combined efforts did reasonably well during the year and made progress to deliver the services effectively and efficiently.

We are grateful to all our stakeholders for being with us and supporting us during these challenging times and we look forward to your continued encouragement as we start another year.

My best wishes to all of you.

Dr. Charles Prabakar

## **Executive Director's Message**

As the saying goes, "The Only Constant in Life is Change." Many of us knew this adage, but never before have had we learn to live with, breathe and adapt to change in such a profound way as we have over the past year, both in our personal and our professional lives.

In the year 2020, the outbreak of the COVID-19 pandemic has challenged us with the most unpredictable dreadful experiences. Some of us are struggling to cope with the painful loss of our loved ones who have succumbed to



COVID-19. The severity of impact seriously affected individuals, communities and economies and the overall well-being of persons with disabilities, their families and the elderly.

It was a time of understandable anxiety and stress, but as always we were ready to embrace bold changes. We were able to turn this challenge into an opportunity for a revival, renewal, and new ways. Keeping employees and users safe was our priority. We took every step to ensure that the environment was safe. There has never been a time when technology has played such a vital role in the way we work.

Mobility India rose to the occasion during the pandemic and worked against all odds to provide necessities for the well-being of the most vulnerable populations, by providing health and safety kits, dry ration and medical support for people living in rural areas in Chamarajnagar District, slums in Bangalore and Dimoria Block, Assam. Frontline government workers, self-help group members, disabled people's organizations, NGOs joined hands with us to improve the lives of many. 7585 people supported during COVID-19, 2541 children in school, 5147 availed rehabilitation services and 2980 benefitted through livelihood opportunities.

A great milestone this year, we launched the Master's Program in Prosthetics and Orthotics (MPO), the only one in Southern India. Mobility India's rich experience and learnings in the inclusive community development programs and with the overwhelming support from Azim Premji Philanthropic Initiatives (APPI), we would expand our programs in Chikkanayakanahalli and Turuvekere Taluks of Tumkur District, Karnataka in the coming year. Some collaborations worth highlighting are the ones with the Education Department for Inclusive Education.

Our sincere thanks to our donors who walked with us amid their challenges and to our Board members, who provided reassurance and support. We are grateful to all our collaborators for supporting our growth and development and we look forward to your continued encouragement as we launch into the next phase of our journey.

Warm Regards



# **Committed to Improving Lives**

# **COVID 19 Response**

## **COVID-19 Response**

The COVID 19 pandemic has challenged all of humanity to confront the unpredictable nature of the VUCA world. VUCA, an acronym that stands for volatility, uncertainty, complexity, and ambiguity, has far-reaching implications in the current context of the global crisis that has hit the human race. In the light of the COVID19 growing pandemic, persons with disabilities are often at a greater risk of contracting the virus and developing severe complications. The severity of impact seriously affected communities and economies, the health, including the lives and livelihood, impacted education and the overall well-being of the most vulnerable especially persons with disabilities, their families, mostly children and elderly. They also experienced many barriers and were left out in gaining access to the mass welfare measures, basic needs, and social security services.

To control the spread of coronavirus outbreaks in India, on 24 March 2020, the Government of India under Prime Minister Narendra Modi ordered a nationwide lockdown for 21 days.

MI started its operation and a few of its activities from May 4, 2020, with 33% of the staff members on a shift basis and last week of May it was fully operational. Created awareness on COVID 19 and translated information and guidance from WHO and Ministry of Health and Family Welfare from English to local languages, designed, printed posters on standard recommendations to prevent infection spread and were disseminated across the work areas.



All precautionary steps to address the COVID-19 situation, focusing on the safety of our staff members, the clients and ensuring we diligently meet all our service/program commitments were taken before we started our operations. Guidelines and protocols for staff and service users were prepared and shared with all members of staff. The Sunder Memorial Hall was carefully converted into a mini rehab facility for clients. Staff members involved in providing therapy / assistive devices in close proximity with the users were provided with PPE kits (personal protective equipment, Masks, Gloves, Face shields, aprons) and disinfectants of the devices before handling the devices.



To support a disability-inclusive response to the crisis, Mobility India made several intervention plans for children and persons with disabilities and the vulnerable population in its diverse programs that span across projects in Chamarajnagar, Assam, and Bangalore urban slums. During the same time, collected information about the situation of persons with disabilities in our work areas, working directly with government functionaries at the frontline to understand the crises and need in the community. Donors came forward to support. CBR team along with DPO members mobilized resources from the local governance and institutions. These efforts have been enabled by our CBR team on the ground during the pandemic



Vaccination for all its staff and students (144)



Awareness Creation during the pandemic was crucial. Created and disseminated the posters in urban slums, rural areas, grama panchayats, schools, primary health centres, SHGs, DPOs, and community members and also through phones and in sign language. WhatsApp groups were used to share information about COVID-19. The information helped the community and families of persons with disabilities to take precautionary measures.

- Health care information Posters on COVID-19, symptoms, and precautions
- Safety measures, the importance of washing hands regularly, hygiene, maintaining social distance, and wearing masks safely
- special benefits, concessions, and schemes by the government
- Facilitated the installation of the Aarogya Setu App for community members and made sure they complete the self-test.
- Disinfectant and regular cleaning of the devices
- Guidelines for CBR workers during COVID pandemic
- Collaborated with the local governance body and prepared roles and responsibilities and strengthening the frontline Health and Rehabilitation workers, PHC doctors, ASHA, and Anganwadi workers in controlling the Covid19 outbreak in villages and slums area.
- Games for children with special needs
- Strengthen immunity to prevent diseases
- How to prepare in case someone gets sick in your household

## **Humanitarian support**

	URBAN SLUMS	CHAMARAJNAGAR	ASSAM
Food and dry rations kits	1950 people with disabilities. 9985 family members received the benefit	195 Families	2577 people with disabilities and poor vulnerable family members
accessed various government schemes	833 people with disabilities and their family members		
Personal hygiene, health, and safety kits	100 children	530 children with disabilities	360 children and persons with disabilities
Nutritious food / supplements	88 children with severe disabilities	530 children with disabilities	
Essential medicine	58 children with disabilities	3 persons with disabilities	13 children and persons with disabilities
Educational support	78 children		
SOCIAL SECURITY SCHEMES			
Rs.2000/-MNREGP		22 families	
Rs.500/- Jan Dhan account (only for women)		65 families	
Jan Dhan Yojana,Ujjwala Scheme, Pension,Krishi Yojana,etc).			183 persons with disabilities

## AWARDS AND RECOGNITION

## Crowning accomplishment!



Ms. Ritu Ghosh, Academics Director was awarded as "Eminent Teacher" by Rajiv Gandhi University of Health Sciences (RGUHS), She was felicitated by Dr. K. Sudhakar, Hon'ble Minister for Medical Education, GOK, along with Dr. M. R. Doreswamy, Hon'ble Chancellor, PES University and Dr. S. Sacchidanand, Hon'ble Vice-Chancellor RGUHS, Karnataka



Mobility India Awarded The Prestigious Business Excellence Award By Acquisition International, UK

## **Mobility India Representation in National and International Committees**

- Ms. Albina Shankar, Executive Director is the standing committee member of NITI Aayog, Government of India
- MI is the Technical partner in the Department of Empowerment of differently-abled and senior citizens for retrofitting, Karnataka.
- MI is the advisory board member for the implementation of RPD 2016 Act under the Ministry of Department of Women and Child Empowerment of Differently Abled and Senior Citizen of framing the RPD 2016 Act for Karnataka.
- Mr. Soikat Ghosh Moulic Associate Director-Technical and Quality Systems is a Member of the International Society for Prosthetics & Orthotics (ISPO) advocacy committee from India
- Ms. Ritu Ghosh Moulic Academics Director has been selected as the Founding Board Member of International Society of Wheelchair Professionals (ISWP) and member in International Society for Prosthetics and Orthotics (ISPO) - standard sub-committee and Wheelchair advisory committee.
- Ms. Vennila Senior Manager- Therapy Training is the member of External Review Group (ERG), for developing the WHO Standards for Wheelchairs in collaboration International Society for Prosthetics and Orthotics (ISPO) and International Society of Wheelchair Professionals (ISWP)
- Mr. Anand S N Senior Program Manager is Literature Development Committee member, Inclusive Education Resource Teacher Training Module, Samagra Shikshana Abhiyan, Karnataka.
- MI is in the committee of Management and Monitoring Balakiyara and Balakara Bala Mandhira, Women and Child Welfare Department, Child protection unit, Chamarajanagar.
- MI is the member in the Health Service Implementation Programming review and monitoring committee of Rashtriya Bal Swasthya Karyakram-RBSK program of Health Department, Chamarajanagar.



## **News Clipping**



# Physical Rehabilitation & Assistive Technology

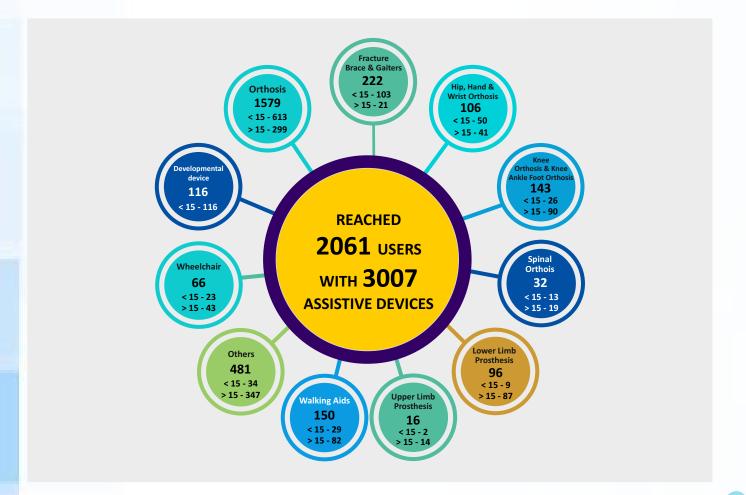
## **Physical Rehabilitation & Assistive Technology**

The 2030 Agenda for Sustainable Development places good health and well-being at the center of a new development vision. It emphasizes universal health coverage (UHC) to ensure sustainable development for all so that everyone everywhere can access the health services needed without facing financial hardship.

Universal Health Coverage can be advanced inclusively only if people can access quality assistive products when and where they need them. Addressing the unmet need for assistive products is crucial to achieve the Sustainable Development Goals, to provide UHC, and to implement the UN Convention on the Rights of Persons with Disabilities

An aging population and a rise in non-communicable diseases, natural disasters, conflict, COVID-19, and other factors give rise to many people needing Physical rehabilitation and Assistive Technology services. Assistive technology enables people to live healthy, productive, independent, and dignified lives and to participate in education, employment, and social life. Assistive products maintain or improve an individual's functioning and independence, thereby promoting their well-being. Without assistive technology, people are often excluded, isolated and locked into poverty, thereby increasing the impact of disease and disability on a person, their family, and society.

Mobility India is one of the largest multidisciplinary professional NGOs in the disability, development, and rehabilitation sector, working towards providing Assistive technology coupled with technology and innovation. MI follows a multidisciplinary approach. The team consists of prosthetists and orthotists, physiotherapists, occupational therapists, technologists, therapy assistants, and health workers.



## **COVID-19 - Tele - Rehabilitation Services**

The COVID 19 pandemic has impacted all segments of society, but seriously affected the health and overall wellbeing of people with disabilities, mostly children and elderly who experienced many barriers in gaining access to assistive technology and therapy services. On the positive side, it has helped in converting this challenge into an opportunity for revival, renewal, and different ways to reach out to people in need.



Through our Rehabilitation services, a dynamic team of multidisciplinary professionals has put in lots of effort; conducting, assessment, fitment, therapy sessions via different digital platforms, for reaching the people in need.

Through the tele-rehab services conducted 2751 therapy sessions and 92 assistive devices were fitted virtually for users from remote and far areas. Shared the best practices to other Non-government organisation to continue their services for people in need.

## The First Assistive Device developed completely via Virtual Support

**Saba**, a 5 years old girl, lives in Vishakapatnam. Born without right leg hips down had left her parents helpless. Her father works as a tailor and the family depends on the meager wages earned by him. They never had any idea that an artificial limb (prostheses) could give mobility to their child.

With able mentoring and virtual support by the Rehab team and with the partner organization The Ability People (TAP), Vishakapatnam, fabricated a complex device of a hip disarticulation prosthesis for Saba during the pandemic lockdown period. A first step in 5 years for the little girl is a joy unparalleled!



The article was featured in "The Hindu" -

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## **Expansion of Digital Transformation Technology**

MI is working for the last 3 years to design and print through 3D printing the transtibial weight-bearing socket, Supramalleolar Orthosis (SMO), hand splint and cranial helmet. The feedback received after in-house clinical trials have been very positive.

3D printing has numerous potential advantages, preventing wastage of materials, less time consumption, protecting environmental health hazards, and it is cost-effective. Besides this, the technology has allowed to reach various remote parts of the country without any hassle.



**Cranial Helmet** 



A cranial helmet is used to gently correct the shape of babies' skulls over time and also to protect the skull from injury for those children who find it difficult to control the head. The combination of cost-effective and on-demand customization, where the helmets are procured from the sportswear suppliers and are prefabricated, do not fit accurately.

Understanding the requirements, MI worked on designing and printing the Cranial Helmet utilising the radical technology of 3D printing, allowing the generation of physical 3D products from digital images and addressing the specific requirement.

## Afaq's journey from being bedridden to gaining mobility Independence

Living in Bangalore, Afaq Asraf Arabi, 30 years, male, has a successful business and takes care of his family. However, during this pandemic he suddenly suffered a stroke, paralysing his right side of the body and he became bedridden and dependent.

In 2020, Afaq was referred to avail the therapy services at Mobility India. He was provided with therapy sessions in achieving his milestones one by one. As he was progressing well, there was the second lockdown in Bangalore. As he required regular therapy to prevent a decline in his development. He was provided with virtual therapy, though initially, it was difficult for him, slowly he learnt how to adapt to the virtual



therapy. Both virtual and offline therapy have helped Afaq to walk again with minimum support both indoors and outdoors and he is able to independently carry out his daily living activities.

He came to MI seated in a wheelchair and now he can walk with minimum support.



**Dibakar** (6) resides in Bangalore and was diagnosed with Cerebral Palsy with delayed development milestone. His parents were referred by NIMHANS to avail therapeutic services at Mobility India. Since 2018, he is undergoing therapy.

His parents says, 'We are happy with the service that we are receiving on a virtual level, as my son is dependent on therapy. I don't know what we would have done if this service was not available'. during this pandemic.

Online measurement and assessment were taken for Dibakar. He was fitted with bilateral Ankle-foot orthosis to assist him with walking

and prevent any further deformities. He was also provided with a Standing frame.

## **Users feedback**



#### Mobility India

Rehabilitation center Marenahalli, 2nd Phase, J. P. Nagar

ashmita dash

★ ★ ★ ★ ★ 3 months ago

PLACE DETAILS



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#### Mobility India

Rehabilitation center Marenahalli, 2nd Phase, J. P. Nagar



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#### PLACE DETAILS



★ ★ ★ ★ ★ 3 months ago

Am very happy and very much satisfied for their excellent service and the product what is my son using I.e.,

footware,wheelchair,handware,etc...which is very comfortable and it's design is very nice. Staff personnel are very cooperative and kind, the therapist whom we met I salute their kind service. Our prayers to them for their success. Thank you Mobility India, we ste blessed to have you in our life (2) (2) (2) (2) (2)

#### Mobility India

conditions.

Rehabilitation center Marenahalli, 2nd Phase, J. P. Nagar



PLACE DETAILS



#### Anjali Pargunde

★★★★★ 3 months ago

Therapists in the mobility india are very caring and they handled patients very nicely.Bestest place for physiotherapy.....must visit for any age group.....

Services are provided at very optimum level meeting the

needs of every individual.Different approaches of

rehabilitation center across the Bangalore.

treatment make mobility India unique and different

Recommended for Aged and young group of people

dealing with neurological, pediatric and orthopedic

#### Mobility India

PLACE DETAILS

Rehabilitation center Marenahalli, 2nd Phase, J. P. Nagar





#### Tushar Malaiya

★ ★ ★ ★ ★ 10 months ago

Recently I visited Mobility India and was glad to see that everyone in the organisation is following the COVID-19 guidelines like wearing a mask, putting a face shield and have a putting a personal protection suite while examining a person. Most importantly social distancing is followed. In these tough time having a such a good set up in this organization help the society in accessing essential service. Thank you MI.

#### Mobility India

Rehabilitation center Marenahalli, 2nd Phase, J. P. Nagar



PLACE DETAILS



#### Mehedi Hasan

★ ★ ★ ★ 3 months ago

:

I am a gbs patient i came here in wheelchair, now after 2 month i am walking with elbow stick, day by day i am improving a lot those credit goes to mobilty india and their doctors. Those who suffering from this kind of disorders i specially recomended this place...

#### Mobility India

Rehabilitation center Marenahalli, 2nd Phase, J. P. Nagar

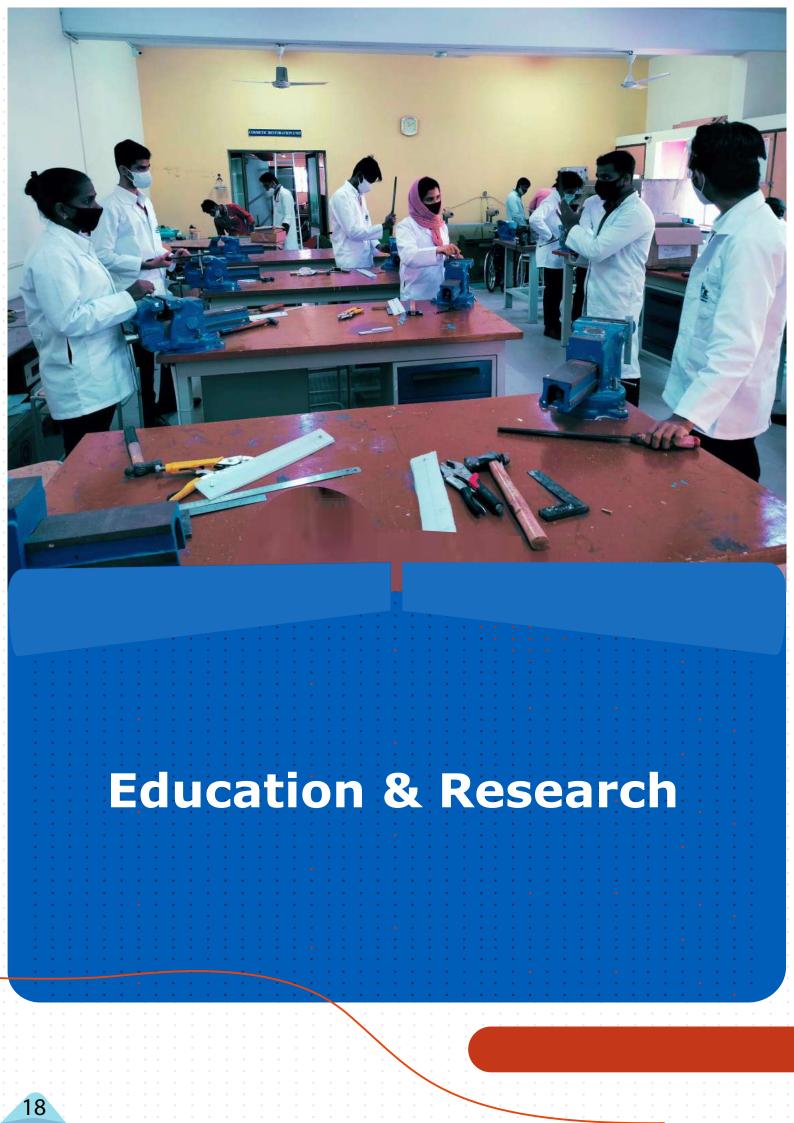
PLACE DETAILS





#### ★ ★ ★ ★ ★ 10 months ago

I am very satisfied with the place and the service rendered by them. I would like specially mention my therapist Karthik who has done a great job and has helped me with my problem.



The need for qualified professionals to improve the quality of life of persons with disabilities is felt more than ever before due to the greater proportion of the aging population, increased risk of accidents, natural disasters, disabilities caused to people living in conflict zones, disability caused due to non-communicable diseases and also due to the Covid-19 pandemic.

MI is the only Prosthetic & Orthotic (P&O) training school in India that has a curriculum recognised by the International Society of Prosthetic and Orthotic (ISPO). Since 2002 has been conducting various long term and short-term training programs; a certificate course in Rehabilitation Therapy recognised by the Rehabilitation Council of India (RCI), Bachelor's and Master's program courses in P&O recognised by the Rehabilitation Council of India (RCI), and affiliated to the Rajiv Gandhi University of Health Sciences, Karnataka, India to develop an appropriately trained workforce for providing health and rehabilitation care.

MI conducts various short-term courses for professionals/personnel for their continuing education and skill development, innovation, action research, and capacity building of institutions.

To date, 5400 candidates representing 33 countries and 25 states of India have been trained in the various courses as well as rehab professionals having upgraded their knowledge and skills.



## **Masters in Prosthetics & Orthotics (2 Years)**

Ten years after developing, planning, implementing, monitoring and managing the undergraduate course, Mobility India launched its Master's Degree Program in Prosthetics and Orthotics (MPO), the only one of its kind in Southern India. 9 students enrolled for the course.

The course aims to equip students with the competencies of imparting comprehensive evidence-based prosthetic and orthotic management to individuals and the community. Students will be acquainted with the research process, and be able to plan and execute a study design as well as create educational programs in prosthetics and orthotics. Technical skills and the capacity to evaluate presentations. Students will acquire the abilities required to set up a clinic and practice.

## Bachelor in Prosthetics & Orthotics/ CAT-II Associate Prosthetist & Orthotist Certificate in Lower Limb Prosthetics / Certificate Rehabilitation Therapy

Long term - structured training				
Title	Affiliation/Recognition	Students/Trainees Graduated (2020-2021)		
		Male	Female	Total
Bachelor in Prosthetics & Orthotics (BPO)	Affiliated to Rehabilitation Council of India, New Delhi (RCI) and Rajiv Gandhi University of Health Sciences, Karnataka (RGUHS)	3	0	3
		10	2	12
		2	0	2
CAT-II Diploma in		3	0	3
Prosthetics & Orthotics		2	0	2
Certificate in Lower Limb Prosthetics	International Society of Prosthetics & Orthotics (ISPO)	2	0	2
Certicate in Rehabilitation Therapy	Rehabilitation Council of India, New Delhi (RCI)	1	4	5
		23	6	29

### Continuing Rehabilitation Education CRE/Workshop/Orientation (Live Webinar)

Topics	Date	Male	Female	Total
Sharing experience & challenges in Ischial containment socket fitting	31-07-2020	48	11	59
Training of caregivers for people with Disabilities	05-08-2020	40	24	64
Managing Rehabiliation Servoces & Covid-19 panddmic Experiences & Good practices of Bangladesh and Nepal	29-08-2020	88	49	137
Community Health and Exercise program for pregnant women during Covid-19	05-09-2020	18	17	35
Recent trends & challenges in construction of spinal orthises-Experience sharing from Yemen & Albania	26-09-2020	52	23	75
Mainstreaming Mental Health and Psychosocial support in Physical rehabiliation	03-10-2020	23	13	36
Current approaches in silicone cosmetic restoration-Indian Scenario	31-10-2020	52	33	85
Participants limited to Mobility India P&O students & Alumni	28-11-2020	30	25	55
Role of Multidisciplinary team and Adaptive devices in children with Autism Spectrum Disorder (ASD)	03-12-2020	27	13	40
Become an Internationally Certified wheelchair service providers (WSP) recent guildlines	03-07-2021	35	9	44
		413	217	630

## **COVID-19 Education from disruption to recovery**

The COVID-19 pandemic brought learning to a screeching halt worldwide, creating the most severe global education disruption in history. The change of teaching mode from offline to online suddenly is indeed a great challenge to any educational institution. However, on a positive note, even before the nationwide lockdown was brought in, MI came up with various measures and continued to provide a supportive learning environment to students who completed their education even during the pandemic.

- The classes were conducted in blended mode.
- The trainers put lots of effort into grooming students both online and offline by using necessary preventive measures for COVID-19 and preparing the students to face the professional world confidently.
- Reached out to 600 professionals and upgraded their skills and knowledge.

Mobility India condoles the sad demise of Mr. Salah Mohamed Isak on 2nd March 2021 due to COVID-19. He completed his certificate course in Rehabilitation Therapy Assistant and went to his hometown, where he contracted the virus and passed away.



## WHO- Training in Priority Assistive Products (TAP) Online Training conducted on Mobility, Vision and Self Care modules COVID-19 Response Assistive Technology project 2021

Currently, more than one billion people worldwide need assistive products, however, only 1 in 10 people worldwide have access to appropriate assistive products. World Health Organization (WHO) published the Priority Assistive Products List (APL) in 2016. Workforce shortages have been identified as one of the biggest reasons for such poor access. WHO recognizes that trained personnel are essential for the proper assessment, fitting, user training, and follow-up of assistive products. Without these four key steps, assistive products are often of no benefit or abandoned, and may cause physical harm.

To improve access to assistive products at the community- level WHO is creating the Training in Priority Assistive Products (TAP). The six training modules will build the skills and capacity of the primary/community healthcare workforce to safely and effectively provide 25 basic assistive products selected from the Priority Assistive Products List. These would address different functional areas, such as mobility, vision, cognition, communication, hearing, and continence.



Mobility India conducted training on Mobility, Vision & Self Care at Rural Development Trust (RDT), Andhra Pradesh, and its own Rural Chamarajanagar project, and CBR Urban Project in Karnataka in a blended mode.

33 (23-Andhra Pradesh, 11 from Urban Bangalore & Rural Karnataka) personnel were responsible for 670 villages including Managers, Teachers, Rehabilitation Therapy Assistants, Orthotic Technicians, and Community Facilitators with more than 10 years of experience in the field were trained in mobility, vision, and self-care. 96 users were screened and 57 assistive products were provided to people in the remote areas without them traveling.



**Mr. Seshanna** was diagnosed with a neurological problem and had difficulty walking independently. He was using a wooden stick available locally and had to depend on people to move around and even to go to his petty shop to do business and most of the time he was homebound.

After the walker was provided to him, it helped him to walk to his petty shop and continue his business and move around the village without the fear of falling.

**Ms. Lakshmi Devi**, 31yrs, was diagnosed with Muscular Dystrophy and had difficulty in standing and walking, homebound because of her condition. After providing a walker, it has helped her walk without fear to shop, visit relatives and friends' homes. The mobility has increased her confidence and self-esteem and helped her to perform her daily living activities.





## **Mobility India Alumni Mentorship Program (MIAMP)**

Alumni Mentorship Program is a unique initiative of Mobility India and this was launched to keep the alumni connected to their alma mater and create a nurturing environment to enhance the professional development of the graduates by integrating real-life experiences of learning and practice.



Due to the pandemic, the Alumni meet was virtually organized, and eight webinars were conducted on sharing experiences and challenges in Ischial containment socket fittings, training of caregivers for people with disabilities, managing rehabilitation services during the pandemic, good practices of Bangladesh & Nepal, community

health and exercise program for pregnant women during the pandemic, Recent trends & Challenges in construction of spinal orthoses - experience sharing from Yemen and Albania, Mainstreaming mental health and psychological support in Physical Rehabilitation, Current approaches in Silicon cosmetic Restoration-Indian scenario. 55 former students of the LLO, LLP & RTA programs, now representing various NGOs and private organisations, in Albania, Bangladesh, Cameroon, India, Nepal, and Yemen attended. The students represented at the Regional, National, International and Global levels **Mr. Erlis Iljazis** completed his ISPO CAT II program in 2008 and started his career in Prosthetic Centre, University Trauma Hospital, Tirana, Albania. Initially, he was working as a Prosthetic technician, now he is in charge of the Prosthetic Centre.

He says "the Alumni program is a very good platform to be in touch with colleagues and students to share and discuss new developments in the P&O and other assistive technology fields".



He can receive the solution of different designs and treatments which he has been facing during his day-to-day work. Apart from that, he can contribute to spinal orthotics by emphasizing the importance of the SOSORT guidelines in the treatment of Adolescent Idiopathic Scoliosis.

## Inclusive Higher Education-Pathway to Progression: A Unique approach

The National Education Policy-2020 focuses on implementing Equitable and Inclusive Education across the country. Mobility India's focus has always been on Inclusiveness.

During the academic year 2019-20, three students with speech and hearing impairment enrolled in courses. All the training staff, peer students and supporting staff were trained in sign language. Though initially there were some issues, the trainers enabled the 3 students to complete their courses.

**Mr. Budhicharan Hrangkhawl** - the first student with speech and hearing impairment, overcoming his disability completed the ISPO Internationally accredited single discipline P&O course. He was an adopted child, hails from the remote area of Tripura, the Northeast region of India, and his parents were supportive.

Ferrando School for Speech and Hearing at Agartala, having identified his skill and interest for learning different trades, his keen observation and ability to take responsibilities enrolled him for the Lower Limb Prosthetics course. With hands-on practice and support from his peer group and trainers, he successfully graduated as Associate Prosthetist in 2020. Apart from academics, he has actively participated in many cultural events including the cultural fest MIRAAS. He was the winner of the "JO MILLAR Memorial AWARD".



**Ms. Malika Das**, a speech and hearing impaired, is the only child of her parents, Malika's father was keen that she should be equipped with some skill that would enable her in the future to be selfreliant. Being an agriculturist, he did not have the financial means to afford her training. Fernando School for Speech and Hearing Agartala, came forward to support to do the Rehabilitation Therapy Assistant course.



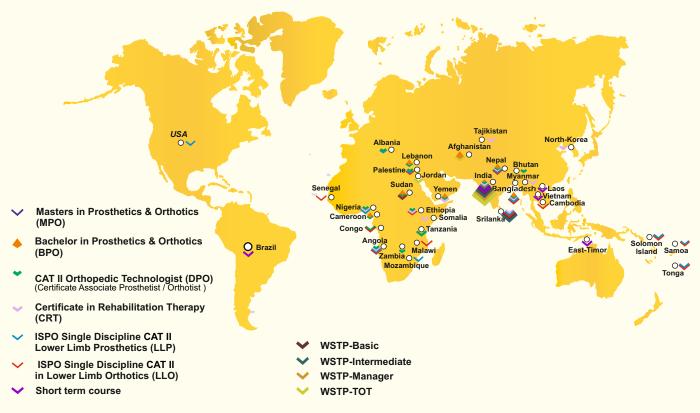
She is very proactive in every area of learning. Although initially, it was difficult for her to understand the teacher/trainer, over time, both she and the trainer overcame the barrier, and she completed her course successfully.

She also received special appreciation for the "JO MILLAR AWARD", of overcoming personal challenges and continuing her education despite her difficult life situations.



**Ms. Dipali Chakma**, a speech and hearing impaired student, completed her Rehabilitation Therapy Assistant course, supported by Fernando School for Speech and Hearing, Agartala.

The training program was modified and with the support of the trainers she had more hands-on practice to work with people with disabilities to offer services.



#### **DIVERSITY OF OUR STUDENTS**

**Jo Millar Award 2020** was conferred to **Mr. Budhicharan Hrangkhawl**, the first student with speech and hearing impairment from a remote area of Tripura, Northeast, India, for his efforts in overcoming his disability and completing the ISPO accredited single discipline P&O course

A special appreciation award was given to two students for overcoming personal challenges and completing their courses after being in tough situations. Ms. Mallika Das, a speech and hearing impaired student completed a Certificate in Rehabilitation Therapy, and Mr. Noyal Devasia, Bachelor in Prosthetics and Orthotics.

Jo Millar Award was introduced in 2014 in memory of Late Mrs. JO MILLAR, founder of MIBLOU, Switzerland. This award is presented as a token of recognition for the outgoing student who has overcome barriers in personal life as well as academics and has become successful.





**Title** - Training of Mid-Level Rehabilitation Workers for Community-Based Rehabilitation Programmes

**Authors** - Ritu Ghosh, Vennila Palanivelu, Emma Tebbutt, Sunil Deepak

Published in Disability, CBR & Inclusive Development, 31(4), pp.191–216. Published on 23 Feb 2021

**Title:** Views and Experiences of People with Intellectual Disabilities to Improve Access to Assistive Technology: Perspectives from India

Authors: Fleur Heleen Boot, Ritu Ghosh, John Gerard Dinsmore, Malcolm MacLachLan.

Published in Disability, CBR & Inclusive Development, 31 (4), pp.191–216.

Published on 23 Feb 2021.

**Title:** Understanding the Global Challenges to Access Appropriate wheelchairs: Position Paper

Author: Ms Ritu Ghosh, Etal

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Health, Vol-18, Issue-7, Published on 24th March 2021

**Title** : Cultivating Innovation: Assistive Technologies

Author: Mr. Soikat Ghosh Moulic

**Published in i2M**: Idea to Market by Biotechnology Industry Research Assistance Council (BIRAC), Department of Biotechnology, Government of India

Published March 2021.



Low Cost Modified Reverse Walker to Assist Children with Cerebral Palsy in Hands-free Walking: A Pilot Study

Minakshi Sharma', Sanyam Bajracharya Mobility India Rehabilitation Research & Training Centre, Bengaluru, India

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Link: https://dcidj.org/articles/abstract/431/

## CBR & INCLUSIVE

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#### Original Research Articles

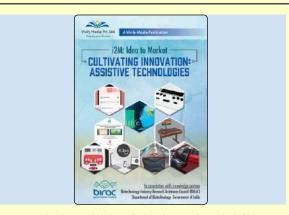
Views and Experiences of People with Intellectual Disabilities to Improve Access to Assistive Technology: Perspectives from India

Authors: Fleur Heleen Boot 🔜, Ritu Ghosh, John Gerard Dinsmore, Malcolm MacLachLan

Link: https://dcidj.org/articles/abstract/10.47985/dcidj.423/



#### Link : https://www.mdpi.com/1660-4601/18/7/3338



Link : https://online.fliphtml5.com/tjuct/ndof/





# Community Based Inclusive Development Programs (Chamarajanagar, Urban Slums, Bengaluru)

The community-based inclusive development programs play a pivotal role in poverty reduction and ameliorating the conditions of persons with disabilities. It enables disability-inclusive development on the ground, especially focussing on the wellbeing of the most vulnerable populations, people with disabilities and their families, the elderly population, and other disadvantaged groups.

## Chamarajnagar

Chamarajanagar District, Karnataka in 210 villages (two Taluks - Chamarajanagar and Gundlupet, six Hoblis, 49 Gram Panchayats

The program promotes inclusive education and social inclusion for children with disabilities along with early intervention, therapeutical services, and provision of assistive products

## **Stakeholder Engagement improves Community Development**

Community engagement and involvement and participation of persons with disabilities are a vital part of the programs. It connects and involves the stakeholders and the community in the overall development process. Building the capacity of the stakeholders, information sharing, and consultations benefits in ownership of it and the decision-making process.



## Anganwadi & Accredited Social Health Activist (ASHA) Workers Training



The training was organized on Disability and Rehabilitation, RPD Act 2016, Identification and Early intervention, Need and benefit of assistive products and therapy services, and Nutrition 6 hoblies at Chamrajnagar. 535 members participated.

## **Parents' Orientation**

Awareness programs were organized for parents on Child Rights and Protection, Speech and Hearing, Vision, Rehabilitation services, basic therapy exercises and benefits of assistive devices, management of Children with Intellectual Disabilities, the importance of nutritious food for children with disabilities and its preparation, personal hygiene and livelihood opportunities in the community



## **Rehabilitation Services**

The therapist, rehab therapy assistants, speech therapists, audiologist have provided services to Children with disabilities. Assessment programs was organized at Chamarajnagar for children with physical impairment, vision, speech and hearing. They were provided appropriate assistive devices and children were referred to medical institutions for corrective surgeries.



8 community-based therapy centres has an easy access for the people in the community and the services are available for children with cerebral palsy, developmental delays, intellectual disabilities and speech and hearing impairment. They receive therapy services, daily living activities (ADL) training. fitment of the devices, gait training, repairs, and maintenance of the assistive devices at the centre. Communication and information materials on Disability, assistive products, disability rights are exhibited in the centre as well as parents' sensitization programs. Anganwadi teachers, school teachers, visit the centres for availing information. Parents are trained in basic therapy skills to provide basic therapy for the children.

**Home-Based Therapy services** were provided to children with severe disabilities in their homes as their parents found it difficult to carry them to the therapy centres to avail themselves of the intervention services. The parents were oriented on the management of the children in their homes as well. 32 children with cross-disability were provided various services in their homes with regular follow-up of the assistive devices. These services benefited the single parents as they had to go to work for their livelihood.





**Mahalakshmi**, 9 years and Harshan 7 years, both siblings are hard of hearing they live in Teraknambi village, Chamrajnagar. Their father works as a daily wager, the mother is a housewife. When Mahalakshmi was 3 years old her mother observed that she was not responding to sounds. She was then referred to the All India Institute of Speech and Hearing, Mysore for assessment, similarly, it was with her brother Harsha.

Both the children were referred to Mobility India, and after assessment, they were provided hearing aids and speech therapy.

After the regular interventions, Mahalaksmi's hearing improved and she is now able to say a few words. She attends school independently and her academic



performance has improved. Harshan's auditory skills have improved and he enjoys watching TV, listening to music, and dancing.

The parents were pleased and shared that after the fitment of hearing aids and speech therapy provided to their children, their condition has improved remarkably. They have learned to maintain the hearing aids and are aware of ENT services, hearing aid services, and home-based activities after participating in an awareness program conducted by Mobility India.



Madan, a 10-years resides in Chandakavadi village, Chamrajnagar, was born as a premature child. He was diagnosed with cerebral palsy, had delayed developmental milestones, and was not in a position to sit, stand or speak. His father is a painter and is the sole breadwinner.

A family friend referred the child to Mobility India. This is the 4th year of therapy intervention provided to Madan, along with suitable home modification and assistive devices. He is now able to independently sit and crawl, speaks a few words, stand with support, and can dress and wash his face. His parents are very happy with Madan's improvement.

## **Inclusive Education**

Education is the fundamental right of all children", and "Universalisation of education" is meaningful only when all the children are in school and get an education.

## Makkalavani YouTube channel

The global coronavirus pandemic disrupted education for children on an unprecedented scale. School closures, remote learning, and reopening plans have created a host of new challenges for children and young people, as well as their teachers, parents across the globe, while also exacerbating existing inequalities.

To ensure that children continue to study and practice during the lockdown, the Education Department of Karnataka launched a YouTube channel called Makkalavani. It is to



introduce funny and creative interesting activities to children in the summer/lockdown period by using available materials at home. These educational programs were telecast for half an hour every day. **MI developed and provided 3 videos on toys (running rabbit, straw spinner, and bottle rocket)** at the request of the Karnataka Education Department and all the videos were telecast. The children with disabilities were involved in these activities.



**Vidyagama:** an innovative program for children was implemented by the Karnataka Education Department, to engage children in the learning process during the pandemic when schools were closed. As per the department guidelines, teachers conducted learning activities for children in small groups in different

places in the villages instead of school premises.

Samagra Shikshana Karnataka (SSK) in collaboration with NGOs working in inclusive education, designed and developed activity books for children with disabilities in Kannada, English, Science and Social Science. MI is a member of the editorial and module committee. The learning kits were provided to 48 schools, through which the teachers conducted many activities for children along with the CEC tutors. Teachers used the teaching-learning materials and engaged children in the learning process and shared that these were very effective during Vidyagama program implementation.

**Module preparation training** organized by Samagra Shikshana Karnataka (SSK), Bangalore. Including BIERTs 12 members from various districts of Karnataka were involved in module preparation. As an outcome of this, the newly revised handbook has been prepared and used for training.

## **Community Education Centres**

40 community education centers are functioning and 908 (Children with Disabilities Boys 76, Girls 52, and Boys 412, Girls 368) are getting benefit from these centres. The tutors used a different strategy and in collaboration with school teachers' suggestions, conducted group activities and individual activities under the Vidyagama program to ensure that the learning continues. The involvement of the children was good due to



humorous, joyful curricular activities like climbing lizards, making 3D dragons and running deer's, etc. The school teachers appreciated tutors and requested them to conduct these activities for other school children as well.

## **Capacity Building of CEC Tutors**



The training was imparted on the preparation of teaching and learning materials at hobli level. 12 types of 3D puppets for story sessions, science activities, and co-curricular activities were developed.

The tutors had an exposure visit to ASHA SADAN Special School and Karunalaya who work for children with intellectual disabilities and Seventh-day Adventist schools for

speech and hearing. 28 tutors participated and availed training on the ways to handle children with intellectual disabilities and speech and hearing disabilities and the learning materials which can be used to make the children learn

## SSLC exams provisions and exemptions for children with disabilities - 3 students are toppers

Many parents (of children with disabilities) appearing for the SSLC examination were not aware of the provisions and exemptions available to their children. Mobility India education coordinators in collaboration with the Education Department with the support of District and Taluk inclusive resource teachers organized a sensitization program and explained the provisions and exemptions available for parents and teachers at Chamarajnagar. 90 members participated. Few provisions were not suitable for students with Intellectual Disabilities, Visually impaired, and Speech and Hearing. Parents were guided to procure a certificate from doctors based on their disability conditions to avail of the exemption.





- Education Department revised the circular of provision and exemption based on the severity condition of CWDs
- 37 students with disabilities received alternative textbooks and learning kits instead of mathematics and science and cleared the exams

## **E- State Level Children Annual Parliament**



Four children with disabilities from the community education centre participated in the state-level E-Parliament program through virtual mode. 70 children participated in this program from 22 districts of Karnataka. Mrs. Uma Mahadevan, Principal Secretary of the Panchayath Raj Department shared that the programs implemented by RDPR (Rural development and panchayath raj) for children in collaboration with the

health and education department at the gram panchayat level. Especially she gave information about Oduva belaku, children gram sabha, and Makkala Habba programs

The children mentioned raised their concerns about the nonavailability of assistive devices due to COVID 19. and online education and its difficulty faced by children with disabilities, child trafficking, devadasi system, child labour issues, children addicting to the drug, child marriage, malnutrition, and non-availability of transportation. In North Karnataka, the Gram Panchayaths has not implemented Oduva belaku and children gram sabha program effectively.

## **Child Rights Gram Sabha at Chamarajnagar**

Mr. Shivakumar, Education Coordinator participated in a virtual meeting on child rights gram Sabha organised by Child Rights Trust, Bangalore. The meeting was about how to conduct children gram sabha during COVID 19 pandemic situation. Mrs. Uma Mahadevan, Principal Secretary, Panchayat Raj Department shared information about how the panchayat raj department has taken action to implement various



activities for children to engage in learning and other development processes.

#### Oduva Belaku to keep rural kids engaged

During the pandemic With the reopening of schools deferred, The Education Department announced unique initiatives for children. The Rural Department and Panchayath Raj Department launched a new program **Oduva belaku** to engage children in reading and learning, and provide a platform to raise their voices concerning their basic rights. This program aims at bringing government



school children, particularly rural kids back into the learning fold in a systematic manner.

Each gram panchayath was mandated to establish a library for children in their school premises to develop reading habits. Mobility India conducted 10 sensitisation programs on different topics were conducted to strengthen their knowledge on various subjects.

The Department also set up a task force at the gram panchayat level to assist a larger program Makkala Snehi Gram Panchayat "Child-Friendly Gram Panchayath" It covers a plethora of programs like awareness on child rights, food, nutrition, environment protection, and Oduva Belaku.



Mobility India in collaboration with Taluk and Gram Panchayats effectively in 17 Panchayats and conducted 7 Children Gram Sabhas at 7 villages of Chamrajnagar. 450 children took part and raised issues related to the nonavailability of teachers, their school's surroundings with local governance. Local bodies of all Panchayats assured children and teachers the support

The children who were part of the Community education centre enrolled to panchayath library and availed its facilities. MI provided educational materials. The CEC tutors, special educator, and speech therapy assistant conducted activities like preparation of 3D glass, parrot in a cage, and explanation of VIBGYOR through Newton and Benham disc and jumping rat. All the children enjoyed the activities and shared their experiences. 675 children benefitted.



### **Bangalore Urban Slums**

Community-Based Inclusive Development (CBID) programs in 38 urban slums in 10 Bruhat Bengaluru Urban Mahanagara Palike (BBMP) wards of Bangalore Urban District

#### **Awareness programs**



Child Rights & Child Protection and safeguarding programs were conducted on child rights, child safeguarding, reproductive health, the importance of Nutrition food for children with disabilities, its preparation at a low-cost, personal hygiene and oriented 117 children and parents from 4 BBMP wards. Participants also learned about the good and bad touches and how to protect themselves. Because of the pandemic, most of the families were stressed about the loss of income and it also affected the children, and few parents sent their children to work and girl children were married. This program helped them to understand the children's rights, families stopped sending their children to work and getting their girl children married.

Health and wellbeing were organized and oriented 240 people on COVID-19 in 6 BBMP wards. The result has been praiseworthy, people gained knowledge about COVID-19, and were vigilant on the symptoms and had taken proper precautions, and followed COVID-19 appropriate behaviour. No member was affected in the first wave. People underwent screening without fear and got themselves vaccinated. People with disabilities and caregivers' immunity improved.

#### **Healthcare and Rehabilitation Services**

Essential Medicines are one of the instruments in balanced healthcare. These drugs are given to people as per their clinical needs in doses that meet their requirements for an adequate period.



Meet **Janvi**, 13 years old girl from Bangalore diagnosed with Cerebral Palsy and intellectual disability. Her father is an auto driver. Janvi - had epilepsy at 1 and is on regular medication, which is under control. The medicines she needs to take every day without a break.

Because of COVID-19 and lockdown, the income was less and parents found it difficult to provide medicine for Janvi, discontinuing the medicine could deteriorate the health.

Like Janvi, 18 children were supported by Mobility India and provided the medicines, resulting in the good health of children and reducing the stress of parents.

#### Nutritious food for children with severe disabilities



Children with disabilities are a vulnerable group for under nutrition. Malnutrition is a critical issue for children under 5. A child with a disability may result from nutrient deficiency, which can result in a broad range of impairment (physical, visual, hearing, intellectual) due to which they face exclusion from social life access to health care services and are at a higher risk of poor health and poverty.

Post COVID-19 people with disabilities and their family members have lost their jobs. Families are finding it difficult to provide nutritious food for their children, especially children with disabilities. Few self-help group members were selected and trained in the preparation of nutritious food, maintaining quality and hygiene.

Mobility India adhering to all safety protocols provided nutritious food to 100 severely disabled children thereby the health condition has been improving and parents are feeling happy.

**Zubair,** 10 years old boy from Bangalore diagnosed with Cerebral Palsy. Father works as an auto driver but does not take care of the family and has some conflicts. Zubair, his mother along his sister are staying in their grandmother's house.

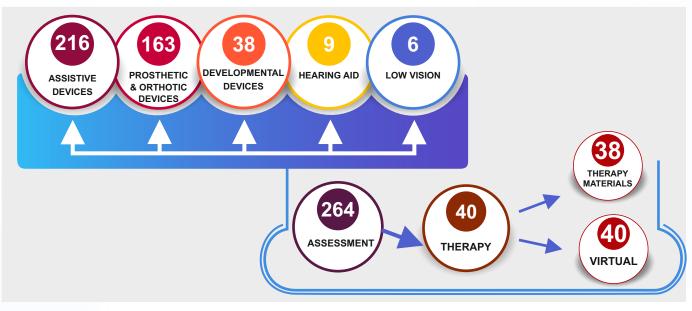
CBR team had identified him and he was provided with regular therapy and assistive devices, which helped Zubair to develop his milestone. He was attending a special school. Because of the lockdown, the mother lost her job and Zubair was not getting the right nutritious food, leading to ill health. Mobility India provided him with nutritious food. He is now responding well and recovering from his illness, gaining his strength slowly.



## **Assistive Technology and Therapy Services**

Assessment programs are organized regularly for adults and children with disabilities. Provided appropriate assistive devices and therapy services to support their daily activity and mobility, thereby preventing further deformities. Cases, where surgeries were needed, were referred to medical institutions and professionals.

216 people received the assistive devices as per their requirements. 40 people with disabilities are accessing virtual therapy, 38 people received therapy exercise materials. People with disabilities' health, daily activities have been improving. Information was provided on COVID-19 & to maintain hygiene inside & outside to the families.



**Sindhu** - 25 years, lives with her mother, her mother is a role model to her. She admires her and looks up to her for guidance and has hopes of one day being like her mother. Sindhu's life was never easy, struggling financially, her mother, being a single parent, is doing her best to provide Sindhu and her two elder sisters with a better life.

At the age of one, Sindhu had a high fever, which led to PPRP-Post Polio Residual Paralysis hampering her right leg. Doctors suggested surgery, but because of financial constraints, they could not afford the treatment and appliances. She was dependent and her mother used to carry her to school



At 11, Sindhu was identified by MI community facilitators and she underwent surgery with the support of MI and fitted with the appliances, and she completed 10th standard.

Sindhu had a job in an Advertisement Company and was contributing to the family, but she lost the job because of the COVID-19 pandemic. MI enrolled her in a beautician course and now she is working as a beautician and earning an income.

#### **INCLUSIVE EDUCATION**



**The school** - what is more than a pedantic site of learning in most children's lives, a source of worry and hope, a site of friendships, and anxieties surrounding exams, discipline, the near and distant future – had come almost to a standstill in these times of the Covid-19 pandemic. While governments and schools rapidly reinvented the educational process virtually, still many children were not able to access education.

78 children with disabilities education (school fees and education materials) were supported by Mobility India. They completed their academic year successfully and moved to higher classes.

**Pavan** 15 years old was identified with the support of Anganwadi teachers. Father is a flower seller and mother works in a garment factory as a helper.

He has clubfoot, which has restricted his mobility and squatting. He underwent surgery at St. John's Hospital. Mobility India supported his surgery and post-surgery management treatment provided home-based therapy and Ankle-Foot Orthosis (AFO).

Due to the COVID-19 pandemic, both the parents lost their job and income, having two-time meals had become difficult. Father being alcoholic, the mother is the sole bread earner of the family. Because of the financial difficulties, they could not pay the education fee of Pavan to continue his 9th Standard.



Pavan who is good at his studies is one among the 78 children, who received support for his education fee, and MI facilitated and got him a second-hand mobile for the online class. Pavan completed his 9th standard and is now promoted to the 10th grade.





# Inclusive Development Centre Guwahati, Assam



**The Northeast** region of India is home to 44 million persons who live in eight states -Arunachal Pradesh, Assam, Manipur, Meghalaya, Mizoram, Nagaland, Sikkim, and Tripura. It is an area of enormous ethnic, cultural, religious, and linguistic diversity. Geographically, the region is dominated by dense forests, rivers, lakes, and mountains. Except for the Brahmaputra valley in Assam, large parts of the region have a very low population density. Assam is the biggest state occupying more than 70 percent of the total population of the region. Significant challenges affect the disability and rehabilitation services in the Northeast.

Dimoria is a development block of the Kamrup (Metro) district of Assam. The National Highway no. 37 (four-lane, East-west corridor) divides the block into two parts, i.e. North and South. On the east side of the block, there is Morigaon district, on the west side is Guwahati, Capital of the State, in the North, there is Kolong River and on the south, there is Meghalaya state. Dimoria block consists of 12 village panchayats.

MIIDC is working in 83 villages in Dimoria Block and is promoting sustainable development by building inclusive communities & empowering local communities to engage and work towards ensuring equal rights through increased access and opportunities for quality health, education, and livelihood services.

#### **Awareness and Sensitization Programs**

Child Rights & Child Protection and safeguarding COVID-19 has led to an increasing number of children being subjected to abuse and exploitation both within and outside their homes. The current crisis may lead to increased incidents of child abuse, child marriage, and child trafficking, leaving children who do not have access to safe reporting mechanisms - helpless. Incidences of child marriage during the lockdown have already been reported. Hence, to sensitise community members on Child Rights, 3 awareness programs were organised at 3 village panchayats of Dimoria Block – Nartap, Digaru, and Barkhat in collaboration with Child Line. 163 participants have attended the event.



## **World Mental Health Day and Screening**

World Mental Health is observed every year on 10th October. This year the theme was "mental health for all". Community-level mental health awareness was organized in collaboration with the District Mental Health Programme (DMHP) in 7 GPs of Dimoria Block. Participants sensitised on;

- Definition,
- Psychosis: Mental Retardation, Schizophrenia, etc.
- Neurosis: Generalised Anxiety Disorder, Phobia, Obsessive Compulsive Disorder, etc
- Mood Disorder: Depression, Maniac disorder and Bipolar



232 ASHA/ Anganwadi workers, self-help groups, persons with disabilities, their caregivers, and health officials attended. 71 people were screened on mental health, and 24 members were referred to the Department of Psychiatry for further interventions.

#### Speech & Hearing assessment and screening:

3 days assessment was organized in collaboration with Assam Speech and Hearing Assessment (ASHA) Centre at 3 GPs, Nartap, Digaru, and Barkhat. 143 people were screened and 5 were referred for ENT, 25 for Speech Therapy, and 33 for Hearing aids. 16 users were followed up on their hearing aids and 9 hearing aids were replaced.



#### **Eye screening:**



A 3-day eye screening was conducted in three schools in collaboration with Lion Eye Hospital, Guwahati, and the Sarba Siksha Abhiyan (SSA) at Luri LP School (Nartap GP), Amsong LP School (Digaru GP) Barkhat LP School (Barkhat GP). 282 persons were screened, 11 were referred for cataract, 8 for refraction, 1 for spectacles, and 5 for medicine.

#### **Rehabilitation & AT Services:**

Children and elderly with disabilities in the Northeast face many barriers in accessing assistive technology and therapy interventions because of geographic and cultural differences. This year, COVID 19 pandemic increased their barriers to accessing Assistive Technology and Therapy services.

MI adapted to new situations quickly and brought in a wide range of techniques and methods in its varied programs in Assam. Initially, the rehabilitation team was trained in virtual methods for delivering the services. Through the use of different digital platforms, the team conducted the assessment, fitment of assistive devices, and therapy sessions to reach people in need.

After the lockdown, MI organised 2 assessment programs in collaboration with Baptist Christian Hospital, (Tezpur) and St. John's Hospital (Guwahati) at IDC- centre for persons with locomotor disabilities. 116 people were assessed. 20 people were referred for further medical intervention.





**Amrit Choudhury** - 35 is a resident of Maloibari Pathar that falls under Maloibari village panchayat. He lives with his wife, daughter, mother, and younger brother. He was working for a private company. He suffered a fall from the coconut tree 5 years back, injuring his spinal cord and he was paralyzed and his life was shattered and he was confined to his home. His wife supports him in all his daily activities,

There are consequences when the sole breadwinner loses his job. To meet the basic needs and earn an income, Amrit's wife started weaving clothes. His younger brother took up a job in a nearby district. They also started rearing small indigenous fish species in a small backyard pond. Nevertheless, their financial



hardship did not end. Amrit was completely immersed in frustration and depression. Standing on his feet seemed like a distant dream.

Amrit was identified by the Community Volunteer, his family was informed about an assessment program. After the initial assessment, he was provided with bilateral ankle-foot orthosis, a walker, and a stick. In addition to assistive devices, he was provided physiotherapy regularly, his balancing improved, and he has gained sensation in his thighs. He can also walk with the help of assistive devices.

Amrit's family members share a positive attitude towards him. They are very happy to see his progress. His wife is a member of a Self-Help Group (SHG) named Mili-Juli. Persons with disabilities, children with disabilities, and their caregivers are members of this group. During SHG meetings, Rehabilitation Therapy Assistants have apprised SHG members regarding the benefits of assistive devices and physiotherapy. Hence, his wife and other family members are aware of these interventions and their benefits.

Amrit is gradually regaining his lost confidence. He attends family functions, social gatherings. He is also an active participant in community-level meetings. He is keen to start working full-time to contribute to his family income. At present, he is engaged in fish rearing and bamboo crafting at his home.

#### **Inclusive Education**

Kamrup Metro district Samagra Siksha Abhiyan (SSA) approached Mobility India – IDC seeking support to sensitize teachers, parents on Inclusive Education and different social security schemes available for persons with disabilities. Accordingly, Mr. Robi Kishore Dutta – Development Officer of MI-IDC spoke about Inclusive Education and various schemes sponsored by the Government for persons with disabilities concerning the Rights of Persons with Disabilities Act 2016 in a webinar. 56



participants including teachers, parents, and guardians have attended the webinar

An inclusive sports event for both disabled and non-disabled children was organized by Samagra Siksha Abhiyaan in collaboration with Shishu Sarothi and Mobility India at SSA's Resource Centre at Khetri. 60 children have participated during the event.

#### Livelihood

The COVID-19 pandemic and the sudden lockdown imposed resulted in drastic devastation of livelihoods. Especially for people with disabilities and their families and not being able to access their Social Security schemes as well.

Mobility India conducted various livelihood training for persons with disabilities



TRAINING	ORGANIZED IN COLLABORATION WITH:	VENUE	NUMBER OF PARTICIPANTS
Poultry Farming	Animal Husbandry & Veterinary Department and Jeevan Jyoti DPO	Nartap GP and Dhupguri	96
Friends of Animals	Animal Husbandry & Veterinary Department and JeevanJyoti DPO	Birubari	11
Wool Knitting	Local Resource Person	Topatoli	8
Piggery	Animal Husbandry & Veterinary Department and Jeevan Jyoti DPO	Dhupguri	12

After provision of training in different phases, Mobility India assisted 5 SHGs and 2 DPOs to establish 7 pig rearing units which have become a viable source of income for persons with disabilities.

Persons with disabilities and inclusive SHG members were also trained on fish rearing, goat keeping, and vegetable cultivation. Post-training, the members were provided with fish seeds, goats, chicks, duckings, vegetable seeds, and equipment for cultivation. Mobility India's effort has provided livelihood opportunities for 235 inclusive SHG members.

## **NETWORKING & PARTNERSHIP BUILDING**

PARTNER				
Samagra Siksha Abjiyan (SSA)	To promote inclusive education, organize school-level awareness programs, health screenings, etc.			
NEDFi	Training in water hyacinth crafting for SHG members			
Bosco Reach Out (BRO)	Training in financial literacy for SHG members			
Assam Speech & Hearing Aids (ASHA) Centre	School-level awareness programs on ear care and speech & hearing screening			
Seven Sisters Development Assistance (SeSTA)	Exposure visits for capacity building of SHG members on livelihoods			
ChildLine	Awareness and sensitization programs on child rights			
District Mental Health Programme (DMHP)	Awareness and screening programs on mental health			
Panchajanya Janakalyan Kendra (PJK)	Exposure visits for capacity building of SHG members on livelihoods			
Animal Husbandry & Veterinary Department, Govt. of Assam	Train persons with disabilities on pig rearing, vegetable cultivation, fish rearing, goat keeping, and poultry farming			

# **Our Reach**





**Dilip Tumung** (24) is a young lad residing in an interior but beautiful village - Paschim Kiling, located 5 k.m away from Khetri GP under Dimoria Block, Kamrup Metro district of Assam. Dilip's family is one of the 35 Karbi (tribal) families in the village. At the tender age of 8, Dilip had a severe burn injury in the right leg. Due to a lack of awareness, his family decided to treat him at home instead of taking him to a hospital. Despite being bedridden for more than 6 months, he lost functional strength in his right leg. Due to financial issues, Dilip could not continue his studies after the ninth standard and started working in a printing press to provide financial support to his family.



Dilip was identified by Mr. Dhruba Jyoti Deka - Community Volunteer during his visit to Paschim Kiling. Villagers have introduced Dilip as a pro-active community member. With his assistance, Mr. Dhruba united 11 persons with disabilities and formed a Self Help Group (SHG) Nengsam, meaning 'peace loving'. Due to his leadership qualities, Dilip was chosen as the President of Nengsam unanimously by all the members.

Since its inception, Dilip was working tirelessly for the betterment of the group and other community members. This SHG provided a platform to create awareness on social issues and bust myths related to disability. Dilip took an active role to mobilize all community members to access social security schemes, financial and agricultural schemes. This awareness creation has yielded positive results. Now all families have their pucca latrine and a house availed through Pradhan Mantri Awaas Yojana. They were also able to reap the benefits of different agricultural and financial schemes.

Dilip, along with other SHG members assisted persons with disabilities in the region to avail of disability certificates and monthly pension. Due to his nature of work, he was able to develop a good relationship with the authorities of Khetri GP. Recently Dilip was made in charge of a women's community hall by the President of Khetri GP. As the President of Nengsam, Dilip supervises all livelihood initiatives related to piggery, goat rearing, and poultry farming. Individually, apart from his job at the printing press, he has started a betel-nut garden along with poultry farming and goat rearing which are viable sources of income. He is also closely associated with the developmental activities of a nearby school. This worn-out school has received 2 blackboards from Nengsam. Dilip represents persons with disabilities from Paschim Kiling in Dimoria Block-level DPO – Jeevan Jyoti.

In the coming months, with the leadership of Dilip Tumung, Nengsam SHG is looking forward to expanding piggery, goat rearing, and poultry farming to generate a sustainable source of income. They are also keen to shoulder more responsibilities to work towards building a disabled-friendly inclusive society. But right now, the construction of a pucca road in Paschim Kiling is the priority of Nengsam SHG. Members have already raised the issue with the concerned authorities and preliminary work for road construction has begun. Joutho (united) self-help group is formed in Khaloibari, a village 6 kilometers from Khetri GP, Kamrup Metro district of Assam. People in this village are mostly dependent on agriculture for their livelihood and some have small-scale businesses.



In 2018, Community Volunteer, Mr. Dhruba Jyoti Deka identified few persons with disabilities for assessment. Later they were provided with wheelchairs, hearing aids, and other assistive devices. A few months later, he organized a community meeting to discuss MI's Community Inclusive Development, the role & importance of Self Help Groups (SHGs). During this meeting, 13 persons with disabilities volunteered and formed an SHG "Joutho" meaning "United" in Assamese. All the members of this group are daily wage workers.

MI imparted several training on financial literacy, bookkeeping, and documentation for the capacity building of members. For additional income, backyard poultry farming and pig rearing is a common practice among villagers and SHG members were not an exception but they lacked focused effort. MI provided training on scientific methods of piggery, goat rearing, fishery, kitchen gardening, and poultry farming for interested members of the group. After completion of this training in several phases, SHG members received piglets, ducklings, chicks, fish seeds, vegetable seeds, and equipment for cultivation. As a joint initiative, SHG members have set up a pig rearing unit. 5 SHG members are also involved in crafting Assamese traditional bamboo items required daily. Such items costs between Rs. 200 - 400. As a result of their collective effort, SHG members were able to elevate their income which was reflected in their monthly contribution as well. From Rs.20 per month, their monthly contribution has increased to Rs.100.

Under the guidance and supervision of President – Mr. Bhupen Tumung, this group has opened its bank account. Members could avail loans within the group, Members were also actively involved in creating awareness on health, promotion of assistive technology, and social security schemes among other community members. As a result, SHG members were able to access houses under Pradhan Mantri Awaas Yojana, pucca latrines, Orunudoi financial scheme, and disability pension. They actively participate in Gaon Sabhas and share their views on different developmental planning. Villagers have started approaching this SHG to seek suggestions for different socioeconomic issues within the community. Many persons with disabilities have received their disability certificates through this SHG.

Just like the name – Joutho, this SHG has shown that the collective effort of persons with disabilities could open doors that lead to self-reliance and self-esteem. Like any other responsible citizen, members of Joutho are contributing their bit towards building a disabled-friendly inclusive society.

# Development and Promotion of Appropriate Technology

## **Development and Promotion of Appropriate Technology**

Mobility India has gained deeper, extensive clinical, and practical experience in developing and promoting quality prosthetic & orthotic components, relevant machinery, and tools suitable to varied settings that have won national and international acceptance.

MI conducts clinical trials of the assistive devices and components, to ensure the efficacy and functionality of the products, which are now made available to the larger population by collaborating with leading institutions IIT Madras, BETiC lab in IIT Bombay, IISc., VIT, SBMT (DEBEL, DRDO) and other private organizations.

### **Clinical study FlexMo Crutches by Mobility India**

Flexmotiv Technologies Pvt Ltd has developed Flexmo Crutch used for enabling mobility in persons with locomotor impairments. To study the effectiveness of Flexmo intervention on the user mobility and acceptance of Flexmo, MI is conducting clinical trials in two phases at various locations spreading out in urban, periurban, and rural programs in Chamrajnagar, Karnataka, and with its partner grass-root organisations, The Ability People (TAP) in Vishakhapatnam, Rural Development Trust (RDT), Anantapur and National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD), Chennai.



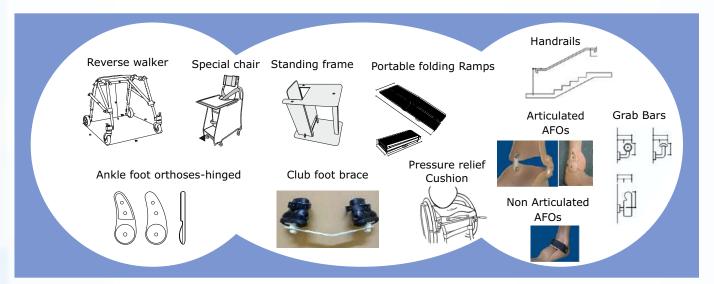
The clinical trial received the Ethical Committee approval from AIIMS, Delhi. 119 users have been identified across the trials sites and fitted with Flexmo Crutches and administered with various protocols in controlled conditions. The detailed outcome of the study could be found out once all the sites are completed with the second review and the data are analyzed completely. Some of the reviews are delayed due to the Covid 19 situation.

## National Standardisation of Health Products with Joint Ministry Mission

NITI Aayog is working towards developing the National Assistive Technology Policy for India as per the WHO Priority Assistive Products list. The multi ministerial approach for this project has brought in WHO, ICMR, NITI Aayog, MSJ&E, MOH&FW, ALIMCO, NI's, private agencies, NGOs, technical organisations under one umbrella.

The Bureau of Indian Standards (BIS) - MHD09, had requested Mobility India to support them in the formation of standards for assistive devices for children and persons with physical impairments and disabilities.

MI along with BMVSS and OPAI has developed the standards for 10 assistive products -Reverse walker, Special chair, Standing frame, Club foot braces, Handrails/Grab bars, orthoses-lower limb, Spinal, Upper Limb, Ankle foot orthoses-hinged, Pressure relief cushion, Portable Ramps which has been submitted to the committee for final review. The entire activity was taken up during the pandemic situation.



# THE CUB- Portable, adjustable, innovative design and comfortable wheelchair - to match the need of every special young user.





# Networking and Collaboration

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### **Networking and Collaboration**

Since its inception, building, creating, and managing a network that is spread across International, National, Regional, State, and District levels has been the core. MI has expanded its institutional networking and collaboration by not only actively participating in several seminars, conferences, and professional events at the international, national, state, and district levels but also, by becoming members in various decision-making committees for framing policies, guidelines, and strategies.

Organised clinical and other training programs involving Indian and international experts, received professionals and trainees from other organisations coming on study/ facility visits, offering internship opportunities for students, and collaborated with external agencies on research projects dealing with subjects of topical interest. Works as the clinical trial partner to ensure that the assistive devices and its components developed by the leading institutions are efficient and functional- before it is made available to the larger population.

This offers opportunities for Mobility India to function as the voice of the people from low-income countries.

#### **NITI Aayog (National Institution for Transforming India Aayog)**

Given the emergent situations arising from the outbreak of COVID 19 and to address the problems arising out of the pandemic COVID-19 outbreak, NITI Aayog organised a High-Level Committee for Engagement of Private Sector, International Organisations, CSOs / NGOs, and other Development Partners, was constituted by Government of India, under the Chairmanship of Shri Amitabh Kant, CEO, NITI Aayog to review and strategize the engagement and contribution to mitigate the COVID19 outbreak, in India. Together with concerted efforts, best practices, and active partnerships to accelerate the war against COVID-19 and achieve thumping victory over the current problems country is facing.

Following which there was another Virtual meeting of the NITI CSO Standing Committee under the Chairmanship of Vice-Chairman (Dr. Rajiv Kumar), NITI Aayog to discuss the activities undertaken by the CSOs/NGOs to combat COVID-19 and related issues. Ms. Albina Shankar participated in both meetings.

#### Whose Life Matters? Challenges, Barriers, and Impact of Covid-19 Pandemic on Persons with Disabilities and Their Caregivers.

WHO declared Covid 19 as a Global Pandemic on March 11, 2020. The Covid 19 Pandemic has affected our lives directly and indirectly. In an attempt to contain the spread of infection different countries adopted different strategies from testing and containment, selective lockdown to complete lockdown. India adopted a strategy of total lockdown from 21st March 2020, without giving any time for preparation. This affected all general and economic activities and all lives are affected significantly by the lockdown. The entire population has been forced into home quarantine. Anecdotal reports revealed that Persons with Disabilities, some patients with chronic diseases, and the impoverished were severely affected by this.

Mobility India took part in the study report that was conducted by Dr. Mathew Varghese, MS Head Orthopaedics Department, St. Stephen's Hospital, Delhi prepared for WHO South-East Asia Region

One hundred and twenty-five children/adults with disabilities and caregivers participated in the survey on Challenges, Barriers, and impact of COVID 19 on People with Disabilities, children, and their caregivers from 10 BBMP wards and 35 slums from Bengaluru urban District. The study reveals that most people faced emotional, psychological, and socio-economic problems. CBR team facilitated with local governance and other sources to address the issues faced by children/adults with disabilities and their families

The study was done to understand the magnitude and nature of the problems faced by Persons with Disabilities in terms of challenges barriers and economic and to support and sustain Persons with Disabilities during the lockdown and resume productive life post-COVID 19 crisis.

The study had ten organizations participating in telephonic survey interviews of a wide spectrum of disabilities across the country. At closure, 5,165 persons with disabilities or their caregivers were interviewed. The answers were analyzed qualitatively to problems common to all and also segregated into problems unique to each type of disability. Based on analysis of the findings recommendations have been made.

#### Rights of Person with Disabilities 2016 (RPD)-State Advisory Committee.

Mobility India represents the RPD 2016 State Advisory Committee and Ms. Smitha attended the meeting organized by the Department of Empowerment of Differently Abled and Senior citizens presided by Mrs, Shashikala Jolle, Minister, Department Women, and Child Development, Empowerment of Differently Abled and Senior Citizens, Government of Karnataka and Departments as well NGO representatives. Discussed various issues related to UDID Cards, Pension, Accessibility, 5% reservation funds in local governance, etc. shared some of the suggestions related to meeting agendas with Minister as well as Director.

#### **International Day of Persons with Disabilities**

Mobility India team participated in the Disabled day celebrations organised by GOK and put a stall at Ravindra Kala Kshetra. Mrs. Ashok R, Revenue minister, Karnataka, and other Cabinet ministers of Karnataka visited the stall and appreciated the Assistive Products developed by Mobility India.





### Samagra Shikshana Karnataka

Ms. Albina Shankar, Executive Director, Mr. Anand, Sr. Programme Manager, Mr. John Fernandes, Programme Coordinator, and Mr. Shivakumar, Education Coordinator participated in meeting with Mr. Reju, State Project Director, Samagra Shikshana Karnataka. Ms. Albina oriented on Mobility India's collaborative work with Education Department for the past 12 years that was implemented in chamarajanagar taluk for children with disabilities under inclusive education and to bring to mainstream schools and involve children in various activities to improve their participation and learning comprehensively. The teachers training helped them to plan and involve children with disabilities in curricular activities and child focus activities like leadership training, children Gram Sabha, and children parliament and inclusive summer camp helped CWDs to improve their participation and develop peer group support for them.

Mr. Reju suggested tracking or enroll all CWDs in schools with the support of other departments and institutions, hands-on training for teachers, and to organise effective assessment programs and appropriate assistive devices for CWDs in collaboration with other institutions. He requested MI to plan to work with the education department at least in five districts on the comprehensive development of children.

#### **Retrofitting two-wheelers technical committee meeting**

Mobility India attended series of Retrofitting two-wheelers technical committee meeting which was conducted by the Department of Empowerment of Differently Abled and Senior citizens, Karnataka. MI inputs have changed the model and the design of the vehicles provided for people with disabilities. Shared different views to the committee to adopt various ideas for the smooth process of delivery of retrofitting two-wheelers for people with disabilities. Department has delivered 1467 two-wheelers for people with disabilities. 36 were obtained for people in the project area.

#### **Global Disability Innovation Hub- (GDI HUB), UK**

The GDI Hub is the World's first WHO collaborative centre on Assistive Technology. It focuses on driving global disability innovation to work towards a fairer world through access to assistive and accessible technology. It brings together academic excellence, innovative practice, and co-creation; harnessing the power of technology for good.

Mobility India was invited to be part of the consortium of international organisations and Universities developed by GDI Hub along with IIT-Madras and IIT-Delhi. Mr. Soikat Ghosh Moulic- Associate Director-Technical and Quality Systems is working on the research study and publication for the WHO innovation paper on AT.

**Social Alpha** - is the largest incubator in Asia, established to support the budding entrepreneurs and innovators who are on a 'mission to create social, economic, and environmental impact' and support them through their 'lab to market' journey, as they create compelling solutions to fight poverty and address India's intractable developmental challenges.

Mobility India is a technical partner of Social Alpha (FISE), and MI will collaborate and enhance the ecosystem for promoting innovation and entrepreneurship in Assistive Technologies, Disabilities, and other allied areas.

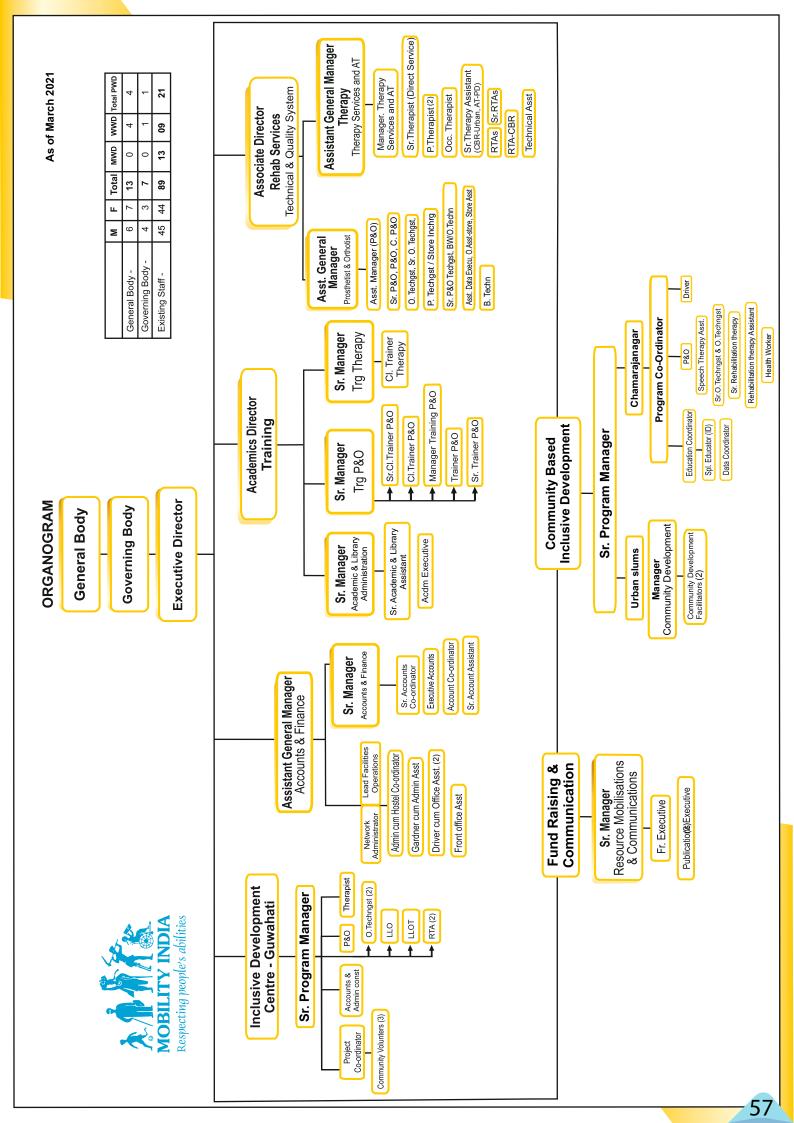
#### OT WORLD CONGRESS 2020- Leipzig, Germany.

The German Association of Orthopaedic Technology - renamed as OT World is the global number 1 platform for effectively sharing knowledge on the current trends, growth strategies, and product innovations for orthotists and prosthetists, Orthopaedic shoe technicians, podiatrists, chiropodists, rehabilitation technicians, doctors, engineers and funding organisations.

In the 2020 World Congress in Leipzig, Germany went virtual for the first time because of COVID-19 from October 27-30, 2020. The theme was Optimal treatment with medical aids. Mr. Soikat Ghosh Moulic -Associate Director-Technical and Quality Systems presented a digital poster on the use of "Digital Transformation and 3D printing in Assistive Devices".



The event drew 4400 participants from 93 countries who benefitted from the interprofessional knowledge transfer. The challenges COVID-19 posed to all care providers, manufacturers, distributors, and service providers, and how they could overcome them were discussed. In addition, over 50 companies from different countries presented their latest products and innovations.





(Amount in₹)

# **MOBILITY INDIA**

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

#### RECEIPTS & PAYMENTS ACCOUNT FOR THE PERIOD APRIL-2020 TO MARCH-2021

31-Mar-20	RECEIPTS	31-Mar-21	31-Mar-20	PAYMENTS	31-Mar-21		
	To Opening Balances		4,36,53,809	<b>By</b> Personnel Costs	4,28,51,050		
46,662	Cash on hand	1,50,793	68,89,290	Administrative Costs	62,00,599		
49,41,223	Cash at bank	1,95,12,322	1,00,56,191	" Rehabilitation Services	91,37,182		
			33,61,819	" Capacity Building,Partnership and Seminar	8,53,875		
1,73,85,949	" Fixed Deposits	-		1 7 0 1			
	" Grants			" Design & Development of Orthotics &			
58,85,126	- CBM	58,18,020	8,65,800	Prosthetics Components	28,500		
				" Human Resource Development in			
23,45,172	- MIBLOU	13,10,670	35,99,541	Disability & Rehabilitation	19,79,508		
			1,95,34,160	" Community Based Rehabilitation Programmes	1,21,80,387		
18,32,687	-University of Oxford (Department of Engineering Science)	-					
,,	······································		15,94,583	" Capital Expenditure	5,97,866		
			30,55,570	" Advances & others	10,98,274		
54,14,590	- International Committee of the Red Cross - New Delhi	69,01,262	-	" Fixed Deposits	53,14,698		
29,700	- World Health Organisation	29,64,400		" Closing Balances			
2,24,10,900	- Azim Premji Philanthropic Initiatives Pvt Ltd.	7,74,580	1,50,793	- Cash on hand	72,833		
-	- Indo-US Science and Technology Forum(IUSSTF)	53,55,000	1,95,12,322	- Cash at bank	1,12,10,116		
-	- Allergan International Foundation	10,35,045					
1,00,000	- CAE Simulation Technologies Private Limited	3,50,000					
-	- Flexmotiv Technologies Pvt Ltd	8,50,000					
6,09,143	- Give2ASIA	-					
94,20,104	" Donation	45,80,812					
1,48,89,778	" Education Programme	1,24,98,124					
1,53,15,564	" Orthotics & Prosthetics	1,02,07,299					
36,51,368	" Bank/FD Interest	95,92,729					
6,29,908	" Misc Income/ in Kind	16,50,329					
73,66,003	" Advances & Others	79,73,504					
11,22,73,877	Total	9,15,24,889	11,22,73,877	Total	9,15,24,889		

As per our report of even date attached, For Shankar Sridhar & Mukundh Chartered Accountants Firm Reg No.: 007273 S

SRIDA BANGALORE CCOUNT

Mukundh S Membership No : 202437 UDIN - 20202437AAAAJU1837

Place - Bengaluru Date - 28th August, 2021

# Mr. Charles Prabakar President Mr. K.L.Vinaya Secretary

IN

#### For Mobility India



# **Big Thank You**

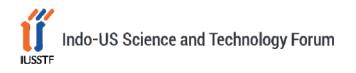
Mobility India is able to implement its vision and strategic programming to move forward with the generous support and funding of our donors who share our belief in the possibility of a brighter future.



















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#### REHABILITATION RESEARCH & TRAINING CENTRE

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#### **CBR RURAL CENTRE**

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