



## “An Investigation in to the Implementation of “Home Based Education” for CWSN Provided By Inclusive Education Resource Persons of SSA in Mahabubnager District.”

\*Sri.Shaik Liyakhath Ali,

Lecturer & Deputy Educational Officer, Govt.DIET, Mettugadda, Mahabubnagar, Telangana State, India.

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**Abstract:** In this study the investigator envisages the Home based education in inclusive education for multiple disabled children of CWSN in relation to some variables like Gender, Educational status of IERPs, Coordinators of SSA, MEOs and parents. It is necessary to understand clearly what is the implementation status of Home Based Education in Mahabubnager district of Telangana. Whether the IERPs are properly doing their assigned duties? What factors are influencing their job chart? What about the coordinators job? What challenges they are facing in implementing the HBE? And how to measure the skills of CWSN in HBE? What about the parents? Whether they are satisfied with the services of IERPs? By studying these factors it may be possible to suggest the Government remedial measures and effective implementation of HBE at grass root levels in order to realize the objective of Universalisation of Elementary education and free and compulsory education to the age groups between 6-14 years along with inclusive education without any bar.

**Keywords :** Home based Education, IERPs, SSA, Inclusive education, MEOs.

### I. INTRODUCTION

Inclusive education means that all students in a school, regardless of their strengths or needs in any area, become part of the school community. They are included in the feeling of belonging among other students, teachers, and support staff. The schools have a duty to educate children with disabilities in general education classrooms.

Government of Telangana is committed to accomplish the objectives of Sarva Siksha Abhiyan and adhered to the approach of **inclusion** in implementing programmes for Children with Special Needs with a strong belief that achieving education for all without the inclusion of these children, is not a reality.

The Right of Children to Free and Compulsory Education Act, 2009 is a landmark legislation in the history of the Nation that makes elementary education a fundamental right for children between the ages of 6-14. But millions of children with disabilities got left out in the Act. Amendments to this law are due to be presented to the Parliament in a supposed attempt to correct this huge oversight. But rather than taking a progressive step towards inclusion, the proposed Amendments seem to be itching towards legalizing exclusion of children with severe and profound disabilities. Aarth-Astha, an organization working on the issue, writes as to why we are on the verge of making another Himalayan blunder.

In 2002, elementary education was made a fundamental right in our country. The right to free and compulsory education for children between the ages of 6 to 14 is a fundamental right inscribed under Article 21 (A) of the Constitution of India which says, “The States shall provide free and compulsory education to all children of the age of six to fourteen (6-14) years in the manner as the State may by Law, determine.”

There are three main features of the Fundamental Right to Education in India.

- All children between the age of 6 and 14 years shall receive free and compulsory education.
- The Government of India and the State Governments will ensure availability of schools with appropriate facilities necessary to impart education in all parts of the country.
- All parents must send their children between the ages of 6 and 14 years to school.

Children with disabilities, including children with very high support needs, are equal holders of this fundamental right. Yet today, through the proposed Amendments to the Right to Education (R.T.E.) Act, 2009, this

fundamental right of the child is being watered down and instead of a school, home is being offered as a legitimate, alternative option for the education of a child with high support needs.

On the basis of the recommendations of the Parliamentary Standing Committee and views of the Department of School Education and Literacy, the following Amendment is proposed as provision to Sub-section 3 of Section 3 of the R.T.E. Act, to enhance the coverage of children with disabilities under the Act:

“Provided that a child with multiple disabilities referred to in Clause (h) of Section 2 of the National Trust for Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act, 1999 and a child with severe disability referred to in Clause (o) of Section 2 of the National Trust for Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act, 1999 may also have the right to opt for home-based education”. (Ref: Brief background note on Inclusive Education under Sarva Shiksha Abhiyan (S.S.A.), a paper presented by Ministry of Human Resource Development in the 2nd Meeting of the Working group on Empowerment of Persons with Disabilities for the 12th Plan, May 19, 2011).

We believe that this would be a violation of the right of the child to legitimate quality education. We urge the Government of India, the Ministry of Human Resource Development and members of the Parliamentary Standing Committee on Human Resource Development to re- assess the proposed Amendment in the light of the human rights of the child rather than the requirements of an educational system that is unable to make legitimate space for the child.

#### **The 2010 R.T.E. Amendment Bill:**

- Defines a child with disabilities and makes a specific mention of a child with severe disability under the National Trust Act, 1999, in the definition of the child.
- Includes children with disabilities in the definition of the ‘disadvantaged’ groups.

More recently we have heard that there is another Amendment to the R.T.E. Act. We believe this comes as a result of a recommendation of the Parliamentary Standing Committee on Human Resource Development which considered the Amendments to the R.T.E. Act and have presented a report on June 2010. This report gives some very important and forward looking recommendations to the R.T.E. Act in relation to children with disabilities. However, it also unfortunately takes a stand on the issue of compulsory education for children with severe and multiple disabilities.

It says, “Another issue before the Committee was the aspect of compulsory education for children with severe or multiple disabilities who may not be in a position to attend school. The Committee understands that children with multiple disabilities need to be part of the compulsory education process. However, there may be cases where a view needs to be taken about the viability of invoking the component of compulsory education in schools. In this connection, the Committee would like to point out that under S.S.A., 75,099 children with multiple disabilities are being provided education in regular schools. This has been made possible by these children being first provided some school preparation programmes before being mainstreamed in regular schools. The Committee understands that the strategy of home-based education under S.S.A. is at present being evaluated. The Committee is of the view that this strategy needs to be vigorously pursued for children in the 0-6 years age group for Early Intervention and School Readiness followed by their induction in the mainstream schools. The Committee, therefore, believes that elementary education should not be made compulsory for children with severe or multiple disabilities and the relevant provision in the Act may accordingly be modified.” (Para 4.12)

As a result of this recommendation we believe a new Amendment has now been added to the Act. This amendment gives children with severe and multiple disabilities the choice of school or home-based education.

#### **What is home-based education?**

The practice of home-based education was initiated by the S.S.A. as a ‘pathway to inclusion’. S.S.A. adopted a ‘zero rejection policy for all children’. In order to fulfil this zero rejection policy it follows a ‘multi-option model’ for children with disabilities.

As per a July 2006 report called ‘Discovering New Paths to Inclusion – A Documentation of Home-based Practices for C.W.S.N’, this means that “no child having special needs should be deprived of the right to education and taught in an environment, which is best, suited to her/his learning needs. These include special schools, E.G.S., A.I.E. or even home-based education.”

“Generally home-based education is defined as the education of children with severe intellectual/physical disabilities, who can be educated in the combination of home-based and alternate educational settings to enable them to achieve independent living skills. Home-based education aims at school preparedness and preparation for life. Alternate educational settings provide opportunities for learning of social skills, vocational skills and implementation of life skills.”

It felt that “experiences of programmes like D.P.E.P. and various research findings have shown that inclusion is best determined by the individual needs of the child. Most children with special needs can be

enrolled and retained in regular schools if adequate resource support is provided to them, whereas there are others who might have to be provided some kind of pre-integration programmes, before they can be mainstreamed in a classroom. There might also be still some C.W.S.N. with severe profound disabilities, who would require an educational programme and intensive specialised support completely beyond the purview and scope of a formal school in the current situation.”

It is these children who have been the recipients of home-based education under the S.S.A. since the early 20th century in our country.

The S.S.A. document ‘Discovering New Paths to Inclusion – A Documentation of Home-based Practices for C.W.S.N’ says: Recent surveys and studies have also shown that a large proportion of C.W.S.N. are out-of-school, owing to the severe nature of their disabilities, which at this point in time might not be accommodated in a regular classroom setting. There are children who, at some point in their lives, may need a special education programme that is completely outside the purview of the regular classroom. Here are the reasons:

- Some disabled children need highly specialized skills taught by specially trained teachers.
- Some disabled children might never respond to the demands of an academic curriculum and will require alternatives.
- Some disabled children could participate in an academic curriculum but would require an inordinate amount of time and attention from a regular class teacher, such that it would be inequitable for the other children in the class.
- Some disabled children need the support of a peer group that is more like they are, rather than being pushed out into the ‘mainstream’.
- Some disabled children might experience school failure without a special education curriculum tailored to their needs.
- Some disabled children have greater opportunities to success in an alternative setting because there is a greater emphasis on parental partnerships, parental cooperation, and active parental participation in the education of the child.
- Some disabled children might not succeed in a regular classroom, as they might not respond to a standardized curriculum.

While it has meant many things, home-based education as it has been practised in India, has never meant a child getting educational inputs five days a week along with all the other entitlements that children in schools have. For example, in most instances the child in home-based education has not had the privilege of the legal entitlement of the midday meal.

This programme, just as the S.S.A., has never kept any record of children with disabilities dropping out and it has never reported on the number of children with severe and profound disabilities who have been mainstreamed after being in home-based education. However the following is the statistics of C.W.S.N Children in Telangana State:

Details	Girls	Boys	Total
Total CWSN identified in the State	79236	97108	176344
Total CWSN enrolled in the School	64820	83508	148328
Total CWSN admitted in RBCs	1421	1907	3328
Total CWSN under Home Based Education			10872

#### **Report on CWSN children’s Home based education in Mahabubnager District:**

Number of Inclusive Education Resource Teachers working: 56

Number of CWSN receiving Home Based Education: 171

As per the zero rejection policy under SSA, children with severe and profound disabilities are considered as not exceptional to cover under Inclusive Education programme. For such children, who cannot attend the school due to their severe disabilities, the school comes to the child at home and provides required services like physiotherapy, speech therapy, writing and reading in Braille etc. At present, 10872 children are covered under Home based education in the state.

So the real status of Home based education attains greater significance to explore the reality.

#### **The Significance Of The Present Study:**

In order to realize the RTE Act-2009 of providing Education to all children including CWSN between age groups of 6-14 of years. It is the prime concern of the Government and Parents to provide education for children with severe and profound disabilities. There need lot of support and patience to deal these children. Hence SSA is a vehicle through which Government of India delivering goods at grass root levels. In order to provide education and support to severe CWSN in Mahabubnager district SSA has recruited 56 IERPs to give support and deal the education and develop skills of 171 identified severe and profound CWSN children. These

IERPs are visiting the homes of the children and providing education and support in 6 divisions of Mahabubnager district. There are 21 IERCs in Mahabubnager district. Hence this study attains greater significance to know the real status of Home based education provided to severe and profound CWSN children. So for in Mahabubnager district no Research study has been conducted to know the implemental stage of Home based education at grass root level.

## **II. STATEMENT OF THE PROBLEM**

The Problem Taken up For the Present Study Is Titled As” An Investigation into The Implementation Of “Home Based Education” For CWSN Provided By Inclusive Education Resource Persons Of SSA In Mahabubnager District.”

### **Objectives of Study:**

**The Main Objectives Of The Study are as follows**

1. To Know the Duties, Responsibilities And Opinion Of Inclusive Education Resource Persons Appointed To Provide Home Based Education And Support To Severe And Profound CWSN.
2. To Study the Physiological Changes Observed In Children With Special Needs During Home Based Education.
3. To Study the Opinions of Parents On Home Based Education.
4. To Know the Opinions of M.E.Os and Officials of S.S.A

### **Research Questions of the Study:**

1. Whether Job Chart Prescribed and Facilities for the IERPs are enough for Providing Home Based Education to Severe and Profound CWSN?
2. What Sort Of Physiological Changes Taking Place Among Severe And Profound CWSN During Home Based Education?
3. What Sort Of Opinions And Support Expressed By The Parents Regarding Home Based Education Of Their Wards?
4. What Sort Of Opinions Expressed By Sectoral Officers Of SSA And M.E. Os?

### **Variables of the Study:**

**a. Dependent variable** in this study is ‘Home based education’.

**b. Independent variables:** gender, Job chart of IERTs, parents support and Physiological changes.

1. **Gender:** Male and Female profound CWSN parents, IERPs and M.E.O.s has been taken into consideration for the study.
2. **Job chart of IERPs:** the job chart of the IERPs is essential for implementation of HBE for severe and profound CWSNs. Hence it is considered in the study to observe whether it is implemented or not.
3. **Physiological changes of the CWSNs:** During investigation of the HBE implementation in the district the physiological changes of CWSN has to be observed whether any progress is recorded or not. Hence this is also considered in the study.

### **Sampling:**

The study was conducted on a sample of 21 IERPs, 89 CWSN children , 81 parents and 10 MEOs along with sect oral officers. Random sampling had been adopted for the purpose of sampling.

### **Tools employed:**

1. Evaluation/assessment checklist developed by SSA Haryana adopted for observing progress of HBE of CWSN.
2. Interview schedule for IERPs.
3. Interview schedule for the parents of CWSN.
4. Interview schedule for coordinators (MEOs & Sectoral Officers).

### **Data collection:**

The investigators were visited 21 IERCs and met the IERPs there and explain the purpose and importance of the research and seek their cooperation and provided questionnaires, later they will go to the CWSN houses and observe the Home based Education and note down the observations in Assessment checklist and thus collect the data.

### Statistical Analysis of Data

All the Interview schedules, Assessment checklist were carefully analysed. The data has been carefully analysed by employing simple appropriate statistical techniques like percentages and averages. The data has graphically represented through pie charts wherever necessary.

### Findings and Conclusions

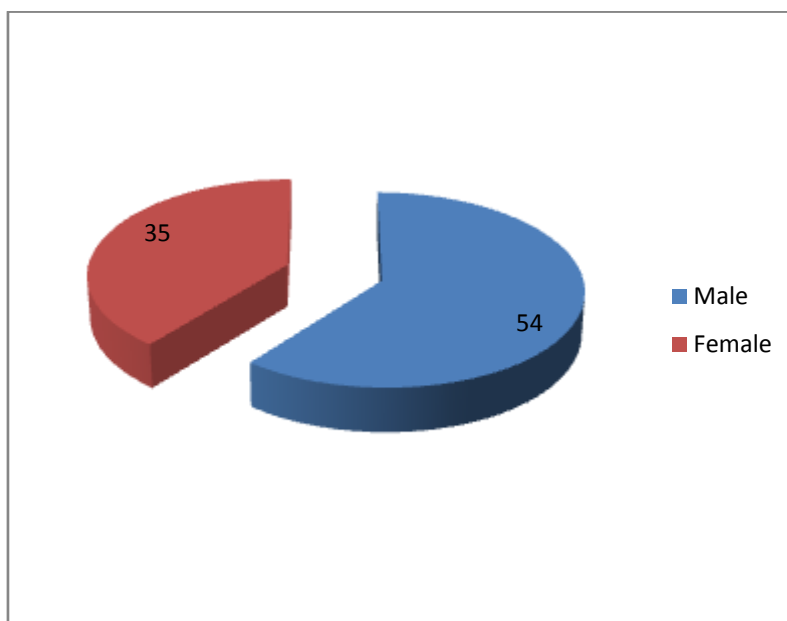
**The findings were analyzed and inferences were drawn accordingly.**

This chapter was divided into 4 parts the first part deals with the description of the observations recorded in evaluation/assessment checklist. Second part deals with Interview schedule for IERPs. The third part describes Interview schedule for the parents of CWSN and fourth part gives description about Interview schedule for coordinators. (MEOs & Sectoral Officers).

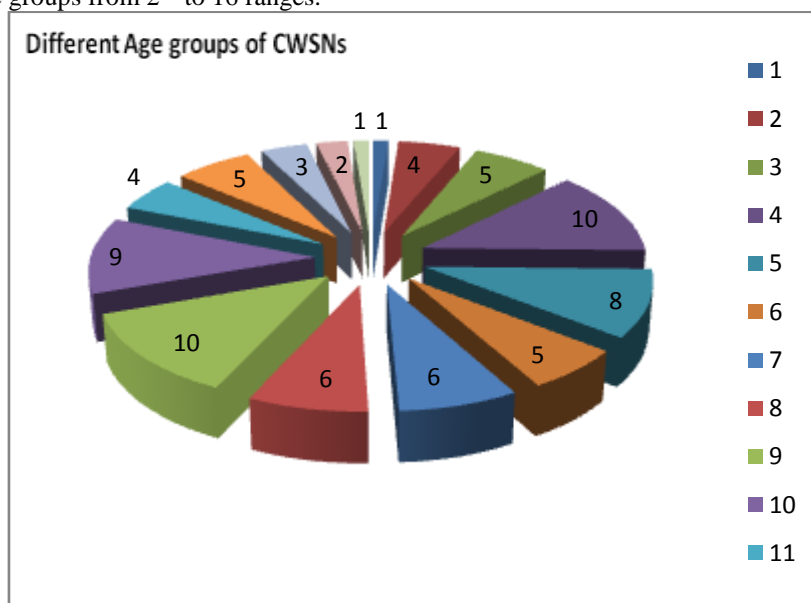
**Description of evaluation/assessment checklist for multiple disabled children.**

**Part a: Basic Information:**

**1. Gender Male: 54 and Female : 35.**



**2. Different age groups from 2<sup>nd</sup> to 16 ranges.**



**Home Based Education Evaluation Checklist**

**Part – B Skill-wise Assessment**

**Table No: 1 Self help skills**

I.Self-Helo Skills	Dependent	Sometimes	Good	Independent	Total
• Eating	43	36	9	1	89
• Drinking	41	36	12	0	89
• Toileting	52	23	13	1	89
• Brushing	61	17	2	1	89
• Bathing	66	18	5	0	89
• Undressing	61	19	9	0	89
• Dressing	58	22	9	0	89
• Grooming	69	17	3	0	89
• Nasal Hygiene	72	14	3	0	89
• Hand washing	64	17	8	0	89

As seen from the above table it is quite evident that despite IERPs providing training through HBE to Multiple disable children 43 children in eating ,41 in drinking,52 in toileting ,61 in brushing,66 bathing,61undressing ,69 in grooming,72 in Nasal hygiene and 64 in hand washing are dependents. Very less progress is seen to attain independence in self help skills.

**Table No: 2 Fine motor skills**

2A Fine motor	dependent	Sometimes	Good	Independent	Total
Catching a ball/ring	46	35	8	0	89
Throwing a ball	40	43	6	0	89
Throw ball in box	55	28	6	0	89
Loop on polls	61	22	1	5	89
Rolling skipping rope	67	14	2	6	89
Pushing a swing	61	19	4	5	89
patting	61	26	2	0	89
Making pinch pottery	64	23	2	0	89
Kneading Atta to shape	68	18	2	1	89
Stamping on paper	68	18	3	0	89
finger painting	60	26	3	0	89
threading	67	19	3	0	89
Pulling/pushing toys	49	37	3	0	89

As seen from the above table it is clearly noticed that majority of the children are still dependent and doing motor work sometimes. So more and more training and concentration is needed.

**Table No: 3 Gross motor skills**

2B) Gross motor	dependent	Sometimes	Good	Independent	Total
walking	42	32	7	8	89
climbing	47	28	8	6	89
Climbing up and down slopes	56	27	6	0	89
Hoping on alternate feet	67	18	4	0	89
Skipping using both feet	74	11	4	0	89
Jumping from height	70	14	5	0	89
sliding	68	19	2	0	89
Creep under	62	24	3	0	89
Crawling through	64	19		6	0
Kicking a stationary ball	54	26	9	0	89
Kicking a moving ball	56	23	9	1	89
Peddling tricycle	66	18	4	1	89
Manipulating an obstacle course	66	20	2	1	89

As seen from the above table the different activities of gross motor cannot be performed by majority of the children .Independent are very meagre .Upto some extent gradual slow progress is noticed.

**Table No: 4 Visual tracking skills**

3ai visual tracking	Dependent	Sometimes	Good	Independent	total
Following a path	44	32	6	7	89
Tracing	47	28	13	1	89
Dot to dot joining	56	28	4	1	89
Colouring within lines	55	29	5	0	89

As seen from the above table Independent children are very less and dependent children are more in visual tracking.

**Table NO.5 Visual motor skills**

3aii Visual motor	Dependent	Sometimes	Good	Independent	Total
Paper tearing	51	30	7	1	89
Making a crease	59	27	3	0	89
pasting	63	16	10	0	89
Folding	53	28	7	1	89
Working with scrap	64	20	4	1	89
Glue,favicol,gum etc	73	14	2	0	89

As seen from the above table it is evident that visual motor activity dependents are more and independents are less.

**Table NO.6 Eye hand coordination skills**

3aiii Eye Hand Coordination	Dependent	Sometimes	Good	Independent	Total
Threading	58	27	4	0	89
Beading	61	25	3	0	89
lacing	57	28	4	0	89
buttoning	55	29	5	0	89
Buckling zips	60	24	5	0	89
Using keys	62	23	4	0	89
Pouring from one to another container	65	21	3	0	89
Stuffing toys	67	20	2	0	89
Use paint brush	69	18	2	0	89
Crayons	63	23	3	0	89

As seen from the above table it is clearly seen that independent task performers in eye hand coordination are zero. Dependents are more in number.

**Table No.7 Visual discrimination**

3aiiv Visual discrimination	Dependent	Sometimes	Good	Independent	total
Part of whole	56	30	3	0	89
What is missing	52	34	3	0	89
Match two halves	56	30	3	0	89
Same colour shape objects	59	26	4	0	89
What is same	54	30	5	0	89
More	59	24	6	0	89
less	64	16	4	5	89
Big	62	15	7	5	89
small	59	24	6	0	89
long	59	23	7	0	89
short	62	20	7	0	89
What is different	62	20	6	1	89

As seen from the above table in visual discrimination activities also children are more dependents and independents are very less.

**Table no.8 Auditory perception skills**

3B. Auditory perception	Dependent	Sometimes	Good	Independent	Total
Listening to sounds	33	38	11	7	89
imitate	39	40	10	0	89
Differentiate sounds	38	43	8	0	89
Identify objects by sound	41	38	10	0	89
Clap 1 to 3 times	43	39	5	2	89
Listen to rhyme repeat song	49	37	3	0	89
Identify musical instruments and sounds	52	35	2	0	89

As seen from the above table it is quite evident Dependent and sometimes task performers are more .Whereas good and independents are less.

**Table NO.9 Kinaesthetic perception skills**

3C. Kinaesthetic perception	Dependent	Sometimes	Good	Independent	Total
Body concept & awareness	59	22	8	0	89
Ground level walk between two lines	56	29	4	0	89
Pathways chalks or rope paint	67	20	2	0	89
Raised level-walking board steps,ramps,skate board	62	23	3	1	89
Right & left	71	16	2	0	89
Backward	62	25	2	0	89
Forward	60	27	2	0	89

The above table shows in kinaesthetic perception also dependent and sometime performers are more in number.

**Table no.10 Tactile perception skills**

3D.Tactile Perception	Dependent	Sometimes	Good	Independent	total
Textures rough & smooth	56	31	2	0	89
Hardness-pressure	58	29	1	1	89
Temperature-hot/cold/wet/dry	51	35	3	0	89
Weight-light/heavy	53	34	2	0	89

As seen from the above table Independents are almost zero in performing tactile perception activities.

**Table No.11 Communication –Receptive skills**

4i.Communication receptive	Dependent	Sometimes	Good	Independent	total
Obeys commands	52	29	8	0	89
Listen to ‘No’	55	23	11	0	89
Acts out, give me	59	19	10	1	89
Turning head to name	55	26	7	1	89
Knows the names of friends and teachers	64	23	2	0	89

The above table shows that independent and good communicative receptors are very less in number. Whereas the dependents and sometime performers are more in number.

**Table No. 12 Communication - expressive skills**

4ii.Communication expressive	Dependent	Sometimes	Good	Independent	Total
Can indicate or name common object	61	28	0	0	89
Name common objects	55	32	2	0	89
Picture reading	59	27	3	0	89
Bye,Namate,sorry	58	27	4	0	89
Says thank you	57	31	1	0	89

As seen in the above table independents are zero whereas dependent and sometimes performers are more in number of communication expressive activities.

**Table No.13 writing skills**

5.Writing Skill	Dependent	Sometimes	Good	Independent	Total
Pincer grasp	63	26	0	0	89
Rolling papers	63	26	0	0	89
Cutting with scissor	69	18	2	0	89
Scribbling with chalk/crayon	67	21	1	0	89
Circles,dots,lines	65	24	0	0	89
Own name	67	21	0	1	89

The above data shows that children rely dependent on writing skills. As Writing is a complicated task more and more training is needed in this direction.

**Table No. 14 Reading skills**

6.Reading skill	Dependent	Sometimes	Good	Independent	Total
Right side of the book	73	15	0	0	89
Looking at the picture	58	29	1	0	89
Turning page	54	27	2	5	89
Left to right	61	19	3	5	89

The above table shows still much to be done in developing reading skill during HBE.

**Table No.15 Self concept skills**

7 .Self concept	Dependent	Sometimes	Good	Independent	total
Name	54	30	5	0	89
Father name	50	32	7	0	89
Mother Name	52	30	7	0	89
Family Members	61	23	5	0	89
Teacher Name	60	24	5	0	89
Home address	72	13	4	0	89
School Name & address	72	14	3	0	89
Concept of Boy/girl	69	17	3	0	89
Telephone numbers	72	11	6	0	89

As seen from the above table it is clearly evident that no child can independently identify self concept.



**Table No.16 Play & Social behaviour**

8.Play & Social behaviour	Dependent	Sometimes	Good	Independent	total
Play with self	47	28	9	5	89
Can amuse self for 10 minutes	51	27	11	0	89
Play with toys appropriately	52	27	10	0	89
Follow rules	63	18	7	0	89
Takes turns	59	26	4	0	89
Can share toys/food	48	38	3	0	89
Puts away toys after playing	62	23	4	0	89
Knows objects belonging to self and others	65	22	2	0	89
Use of property of school/home	68	15	1	5	89
Knows own class room	65	17	2	5	89
Knows own class teacher	59	28	2	0	89
Knows own school friends	70	17	2	0	89

The above table shows dependents are more in expressing social behaviour and play.

**Table No.17 Number skills**

9 number skills	Dependent	Sometimes	Good	Independent	total
One to ten	59	25	5	0	89
Ten to twenty	78	10	1	0	89
Twenty to thirty	77	11	1	0	89
Thirty to fifty	78	8	3	0	89
Fifty to hundred	77	9	3	0	89

The above table reveals independents are zero in identifying numbers. More number of dependents are recorded during observation in identifying number skills.

**Table No. 18 colours identifying skills**

10.colours	Dependent	Sometimes	Good	Independent	Total
Red	50	32	2	5	89
Yellow	66	16	6	0	89
Green	65	18	6	0	89
Blue	58	28	3	0	89
White	56	26	2	5	89
Black	63	20	1	5	89
Brown	78	9	2	0	89
Pink	76	10	3	0	89
Any other	74	10	5	0	89

As seen from the above table dependents and sometimes performers are more rather than good and independents in identifying colours.

**Table No.19 Time skills**

11.Time skills	Dependent	Sometimes	Good	Independent	total
Day	53	30	6	0	89
Night	53	32	4	0	89
Morning(Breakfast, school time)	61	25	3	0	89
Afternoon(Lunch)	63	22	4	0	89
Evening(Dinner)	62	22	5	0	89

As seen from the above table independents are nil in pursuing time skills.

**Table No 20 Fruits identifying skill**

12	Dependents	Sometimes	Good	Independent	total
Fruits	59	26	4	0	89

AS seen from the above table independents are nil in identifying fruits.

**Table No.21 vegetables identifying skill**

13	Dependents	Sometimes	Good	Independent	total
Vegetables	59	24	5	0	89

As seen from the above table Independents are nil in identifying vegetables.

**Table No.22 Shapes identifying skill**

14	Dependents	Sometimes	Good	Independent	total
Shapes	68	18	3	0	89

**Table No. 23 Money concept**

15. money	Dependent	Sometimes	Good	Independent	Total
25 Paise	66	15	3	5	89
50 paise	68	13	3	5	89
1 rupees/coins	61	20	3	5	89
2 rupees/coins	63	17	4	5	89
5 rupees/coins	67	13	4	5	89
10 rupees	63	18	7	1	89
20 rupees	68	17	4	0	89
50 rupees	69	17	3	0	89
100 rupees	69	19	1	0	89
500 rupees	79	9	1	0	89

The above table shows that more number of children are dependent in identifying money concept.

**Table No.24 Measurement skills**

16.Measurement	Dependent	Sometimes	Good	Independent	total
50 grams	82	7	0	0	89
100 grams	82	7	0	0	89
200grams	83	6	0	0	89
250grams	83	6	0	0	89
500grams	79	10	0	0	89
1 kg to 5 kgs	81	8	0	0	89

As seen from the above table good and independents are zero in measurement skills as these are higher order mental operations which need lot of training.

**Table No.25 Dance and Music skills**

17	Dependents	Sometimes	Good	Independent	total
Dance & Music	74	14	1	0	89

As seen from the above table Independent dance performers are nil, good one and more number of dependents are recorded during observation.

**Table No.26 Vocational training**

18	Dependents	Sometimes	Good	Independent	total
Vocational training	87	1	1	0	89

The above table shows 87 members are dependents, sometimes one, good one and independent zero. As the operation is complicated one .It requires lot of skill and training.

**Table No.27 Behavioural problem**

19	Dependents	Sometimes	Good	Independent	total
Behavioural problem	66	18	5	0	89

The above table shows 66 members as dependents whereas independents zero in behavioural problem.

**Table No.28 Any other**

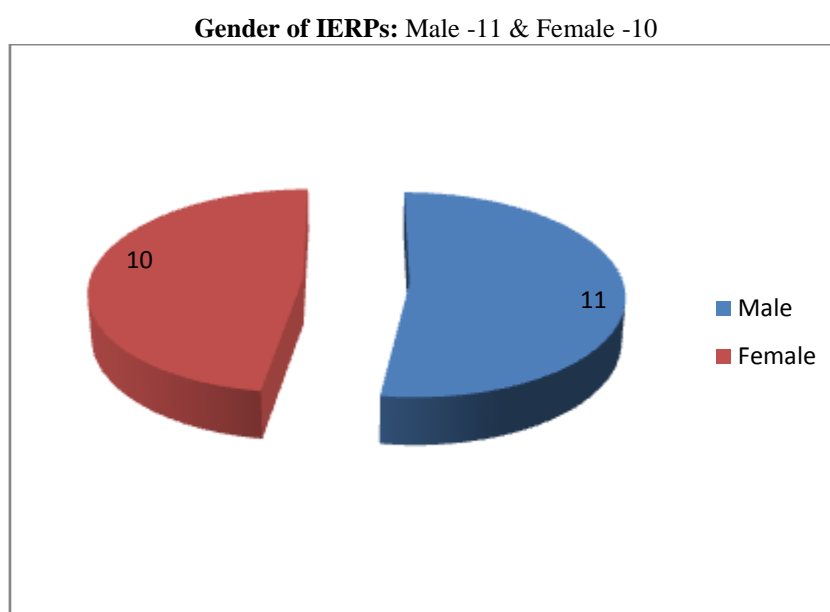
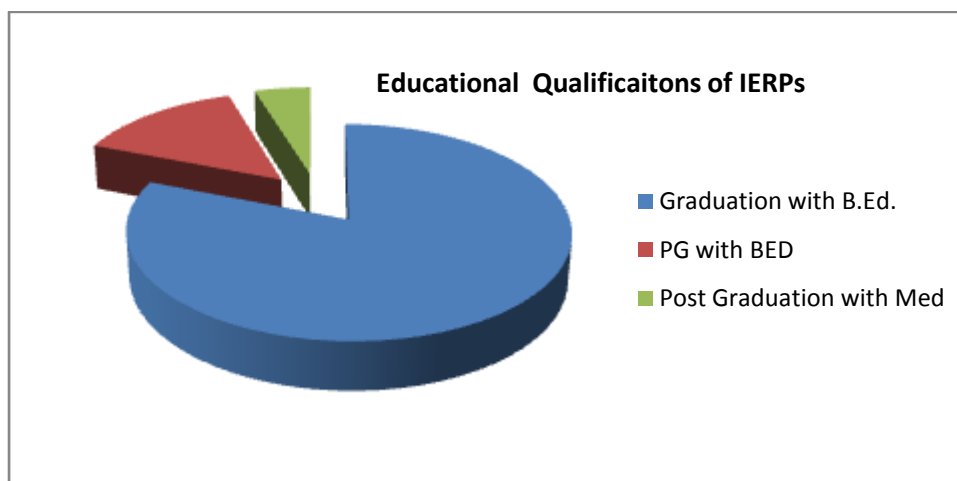
20	Dependents	Sometimes	Good	Independent	total
Any other	80	9	0	0	89

The above table shows that the children were unable to perform different other tasks.80 are dependents, good and independents are zero.

**Basic information of IERPs.**

**Graphical representation:**

**Educational Qualifications of IERPS.**



**Inclusive Education Resource persons Interview schedule Item wise analysis:**

Total Number of Sample 21

The opinions of respondents for close end questions are as follows:

**Table No.29.**

Q.No	NO. of respondents (No )				No. of respondents(Yes)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Qa	1	1	2	9.524	10	9	19	90.476
Qb	0	0	0	0	11	10	21	100
Qc	0	0	0	0	11	10	21	100
Qd	0	0	0	0	11	10	21	100
Qe	0	0	0	0	11	10	21	100
Qg	10	7	17	80.952	1	3	4	19.058
Qh	10	9	19	90.476	1	1	2	9.542
Qi	0	0	0	0	11	10	21	100
Qj	0	0	0	0	11	10	21	100
Qk	0	0	0	0	11	10	21	100
Qm	2	3	5	23.81	9	7	16	76.19
Qq	7	5	12	57.153	4	5	9	42.857

**Q.a. Have you prepared Mandal level action plan?**

**Table No. 30.**

	Male	Female	Total	Percentage	Male	Female	total	percentage
Qa	1	1	2	9.524	10	9	19	90.476

As seen from the above table 90.476% of the IERPs are preparing action plan at mandal level and attending the duty of HBE assigned regularly. This seems the HBE is implementing .The SSA has made an attempt to implement HBE in Mahbubnager district.

**Q.b. Have you identified the children required for the Home based Education?**

**Table No.31**

	Male	Female	Total	Percentage	Male	Female	total	percentage
Qb	0	0	0	0	11	10	21	100

As seen from the above table 100% of the IERPs are identifying multiple disorder children for HBE in the district. This is healthy sign of recruiting resource persons possessing special education degrees and diplomas.

**Q.c. Have you interacted with the family members regarding CWSN children in regard to life skills,social skills,Educational activities ,physiotherapy etc?**

**Table No.32**

	Male	Female	Total	Percentage	Male	Female	total	percentage
Qc	0	0	0	0	11	10	21	100

As seen from the above table 100% of the IERPs are interacting with family members to conduct IE activities.

**Q.d. Have you interacted with school teachers and Headmasters where CWSN were identified?**

**TableNo.33**

	Male	Female	Total	Percentage	Male	Female	total	percentage
Qd	0	0	0	0	11	10	21	100

As seen from the above table 100% of the IERPs are interacting with Headmasters and school teachers to give awareness of IE activities and seeking cooperation of the school officials.

**Q.e Have you recorded the CWSN progress in the school report card?**

**Table No.34**

	Male	Female	Total	Percentage	Male	Female	total	percentage
Qe	0	0	0	0	11	10	21	100

As seen from the above table 100% of the IERPs are recording CWSN progress in report cards. This gives an idea about the progress in the implementation of HBE and other IE activities in the district.

**Q.g. Have you identified NGO working in the areas of IE and prepare action plan for HBE for the services of NGOs?**

**Table No.35**

	Male	Female	Total	Percentage	Male	Female	total	percentage
Qg	10	7	17	80.952	1	3	4	19.058

AS seen from the above table 80.952% of the IERPs given response no to this question..This shows that the IERPs are not working in this direction. The authorities take this seriously and take cooperation of NGOs also so that we can effectively implement HBE.

**Q.h. Have you identified the volunteers with the help of NGOs?**

**Table No.36**

	Male	Female	Total	Percentage	Male	Female	total	percentage
Qh	10	9	19	90.476	1	1	2	9.542

As seen from the above table 90.476% of the IERPs are not identifying volunteers with the help of NGOs as they are not in touch with NGOs.The SSA has to take initiative in this direction to make seek cooperation of NGOs and volunteers for effective implementation of HBE.

**Q.i. Have you interacted with the parents of CWSN?**

**Table No.37**

	Male	Female	Total	Percentage	Male	Female	total	percentage
Qi	0	0	0	0	11	10	21	100

As seen from the table almost 100% IERPs are interacting with CWSN parents to help their wards. They are seeking their cooperation to implement HBE to meet its objectives.

**Q.j Have you given any skill based training to parents and volunteers?**

**Table No.38**

	Male	Female	Total	Percentage	Male	Female	total	percentage
Qj	0	0	0	0	11	10	21	100

As seen from the above table 100% IERPs are giving skill based training in HBN to their parents as they visit the home only once in week on Saturdays. The frequency of HBN need to be increased as it is not enough to visit one day in week, the purpose may not serve.

**Q.k. Have you conducted medical camps and awareness camps?**

**Table No.39**

	Male	Female	Total	Percentage	Male	Female	total	percentage
Qk	0	0	0	0	11	10	21	100

As seen from the above table 100% of the IERPs are participating in medical and awareness camps whenever the SSA taking initiative.

**Q.m. Are you acting as an ambassador of IE?**

**Table No.40**

	Male	Female	Total	Percentage	Male	Female	total	percentage
Qm	2	3	5	23.81	9	7	16	76.19

As seen from the above table 100% of the IERPs are acting as ambassadors of IE to implement HBE and IE activities in the district.

**Q.q. Have you attended any national training on IE ?**

**Table No.41**

	Male	Female	Total	Percentage	Male	Female	total	percentage
Qq	7	5	12	57.153	4	5	9	42.857

As seen from the above table only 42.857% of the IERPS only attended IE national trainings whereas 57.153% are yet to attend the national trainings. Hence the Government has to train many resource people at national level in order to make them more skilful

**4.1. Open ended questions:**

In the interview schedule of IERPs there are several open ended questions which were analysed item wise as follows:

**Q.f. Have you prepared the inclusive activities for the CWSN provided in HBE?**

90.47619% of the IERPs explained in response to the above open ended question that they are preparing and conducting the following activities like Flash cards, models, charts, low cost no cost TLM, self help skills, gross motor skills, facial gestures etc. Whereas 9.523% IERPs haven't responded. This shows the job chart of IERPs being implemented.

**Q.l. What sort of IE friendly atmosphere created by you in CWSN home for HBE?**

95.238 % of the IERPs said they play with children, conduct colourful HBE activities give reinforcements and appreciate parents and children in IE activities. 4.7629% IERPs were not responded.

**Q.n. How many days in a week you go for HBE?**

100% of the IERPs said that they are going weekly once for HBE.They express their inability to properly implement the said task weekly once. Hence the officials of SSA should increase the classes at least thrice in a week as it is difficult to bring physiological changes in multiple disorder children.

**Q.o. What sort of plan prepared by you for the medical rehabilitation of CWSN .Explain?**

Over 61.905% of IERPs expressed that they make the parents attend physiotherapy camps,ALIMCO camps,SADARAM camps and chinnari chupu camps. Whereas 38.095% of IERPs replied negatively.

**Q.p. How many trainings have you attended, conducted by state Governments?**

42.85714% of IERPs attended 1 training,14.285% of IERPs attended 3 trainings,4.76% of IERPs attended 4 trainings,9.523% of IERPs attended 5 trainings,4.76% of IERPs attended 6 trainings,1% of IERP attended 10 trainings and 38.095% were not attended any training.

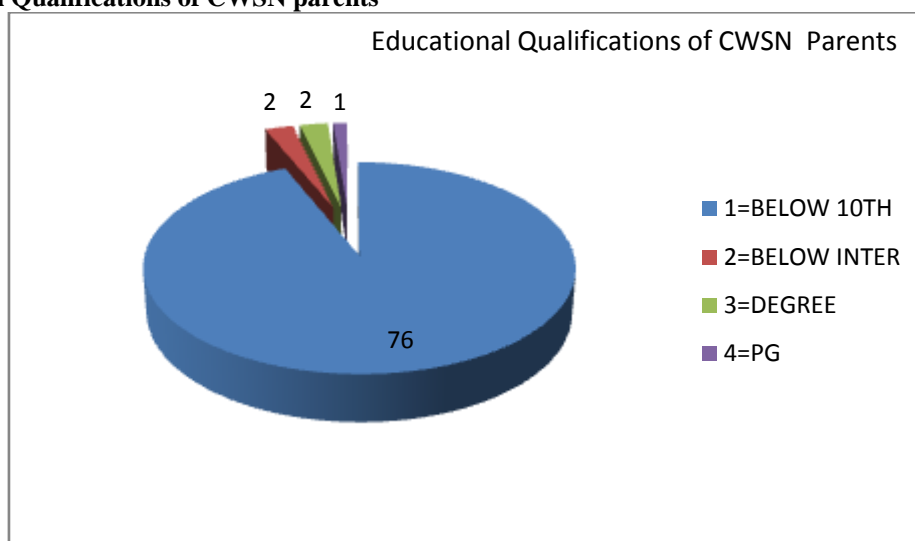
**Q.r. What are the IE activities conducted in IERCs? Explain?**

90.476% IERPs expressed that they are conducting self help skills, time, money, colour, space and number concepts, reading, writing, rhymes, stories etc whereas 9.523% IERPs didn't express anything.

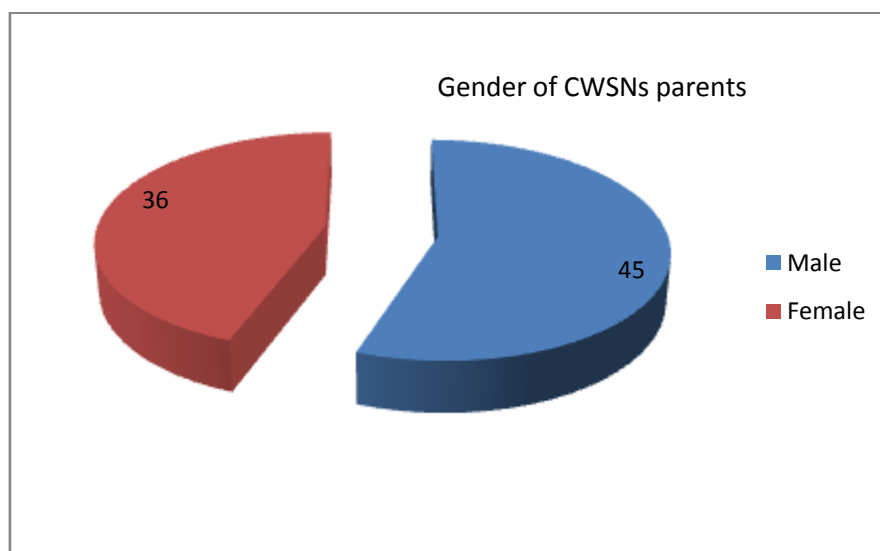
**Basic information of CWSN parents.**

**Graphical representation:**

**Educational Qualifications of CWSN parents**



**Gender of CWSN parents**



**Interview Schedule For CWSN Parents Item Wise Analysis :**

Total Number of Sample 81

**The opinion of respondents for close end questions as follows:**

**Table No.42.**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Qa	36	31	67	82.716	9	5	14	17.283
Qc	45	36	81	100	0	0	0	0
Qd	45	36	81	100	0	0	0	0
Qf	1	0	1	1.234	44	36	80	98.765
Qg	32	24	56	69.135	13	12	25	30.864
Qi	43	36	79	97.530	2	0	2	2.469
Qj	26	18	44	54.320	19	18	37	45.679
Qk	23	19	42	51.851	22	17	39	48.148
Ql	29	32	61	75.308	16	4	20	24.691
Qm	36	24	60	74.074	9	12	21	25.925
Qn	19	21	40	49.382	26	15	41	50.617
Qo	45	36	81	100	0	0	0	0
Qp	45	36	81	100	0	0	0	0

**QA. Do you know from what CWSN Problem your child is suffering?**

**Table No.43.**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
QA	36	31	67	82.716	9	5	14	17.283

As seen from the above table 82.716% parents know from what multiple disorder problem their ward is suffering and 17.283% didn't have any idea about their child problem.

**QC. Do the IERP interact with you regarding your child CWSN problem?**

**Table No.44.**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
QC	45	36	81	100	0	0	0	0

The above table shows 100% of the parents are interacting with IERPs for their child Home based education.

**QD. Has IERP explained the various skills to support your CWSN child?**

**Table No.45**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
QD	45	36	81	100	0	0	0	0

The above table shows 100% of the parents are learning skills from IERPs for supporting their child Home based education.

**QF: Is any NGO helping your CWSN to improve his skills?**

**Table No.46**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Qf	1	0	1	1.234	44	36	80	98.765

The above table shows that 98.765% of the parents are expressing that there is no NGO working for the improvement of CWSN child skills.

**QG: Have you given any skill based training to look after your CWSN child?**

**Table No.47**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Qg	32	24	56	69.135	13	12	25	30.864

As per the above table more than 69% parents have said that they have given training by IERPs for their child home based education.

**QI: Are you attended any medical camp for the betterment of your CWSN Child?**

**Table No.48**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Qi	43	36	79	97.530	2	0	2	2.469

From the above table 97.5% of parents said that they have attended medical camps conducted by SSA for CWSN children.

**QJ: Is the government providing any financial help?**

**Table NO.49**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Qj	26	18	44	54.320	19	18	37	45.679

From the above table it is evident that 54.3% parents are getting financial help from Govt. and 45.6% are not getting any financial help.

**QK: Are you provided any assistive devices for your CWSN child?**

**Table No.50**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Qk	23	19	42	51.851	22	17	39	48.148

From the above table it is found that 51.85% of the parents said that they were provided assistive devices for their children.

**QL: Are you creating IE friendly atmosphere for your CWSN child in your home?**

**Table No.51**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Ql	29	32	61	75.308	16	4	20	24.691

From the above table it is clear that 75% of the parents said that they are creating IE friendly atmosphere in their home.

**QM: Are you feeling cursed being born the CWSN Child?**

**Table No.52**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Qm	36	24	60	74.074	9	12	21	25.925

From the above table it is found that 74% parents agreed that they are cursed being born of CWSN child.

**QN. Is the society accepting your CWSN child and supporting you?**

**Table No.53**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Qn	19	21	40	49.382	26	15	41	50.617

As seen from the above table 50.6% of the parents said that society is not accepting their CWSN child.

**Qo. Are you satisfied by the HBE given by the IERPS?**

**Table No.54**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Qo	45	36	81	100	0	0	0	0

As seen from the above table 100% Parents are satisfied by the training given by IERPs.

**QP. Is there any improvement in the health and skills of your CWSN child by the HBE provided by IERP?**



**Table No.55**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Qp	45	36	81	100	0	0	0	0

As seen from the above table 100% Parents have said that there is improvement in their child regarding training given by IERPs.

**Open Ended Questions**

**QB. Who identified your child’s CWSN Problem?**

**The parents responded as follows:**

30% parents said IERPs, 33% parents responded themselves and 25% parents said by doctors.

**QE. Is he regularly visiting your home to conduct Inclusive activities provided in the HBE? If yes explain some activities?**

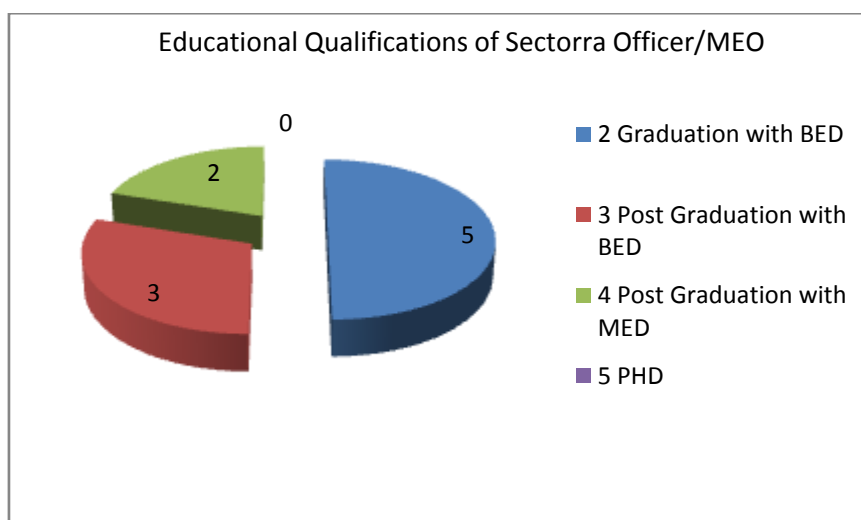
100% parents said that the IERPs are regularly coming to their home on Saturdays to conduct HBE for their multiple disable children.

**HI. Who has given the training to CWSN child?**

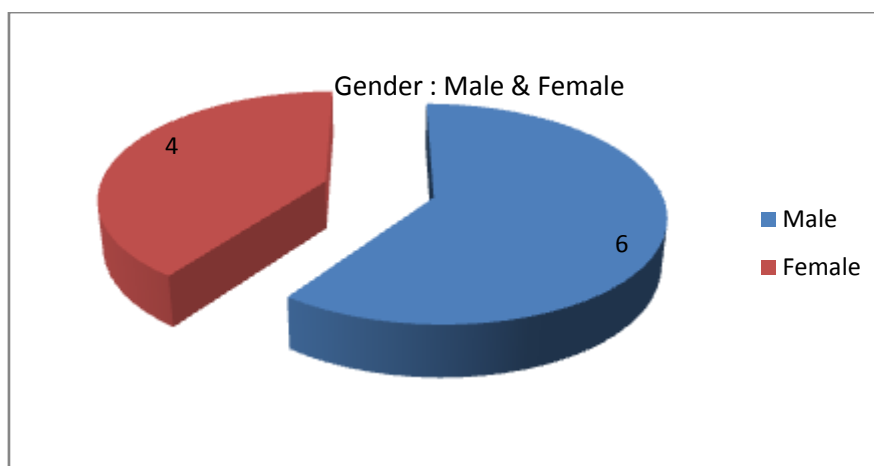
89% of the parents said that IERPs given the training to their wards.

**Interview schedule for coordinators (MEOs & Sectoral Officers):**

**Educational Qualifications for coordinators (MEOs & Sectoral Officers):**



**Gender (Male & Female) for coordinators (MEOs & Sectoral Officers):**



**Total Number of Sample 10**

The opinion of respondents for close end questions as follows:

**Table No.56.**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Q5	1	0	1	10	5	4	9	90
Q6	4	1	5	50	2	3	5	50
Q7	1	0	1	10	5	4	9	90
Q8	6	4	10	100	0	0	0	0
Q9	6	4	10	100	0	0	0	0
Q13	5	4	9	90	1	0	1	0
Q14	5	4	9	90	1	0	1	0

**Q5. Have you attended any training at State and National level with regard to CWSN?**

**Table. No. 57**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Q5	1	0	1	10	5	4	9	90

90% of the Mandal Educational Officer said that they have not taken any training regarding IE activities at State and National Level.

**Q6. Have you attended any training how to monitor CWSN children?**

**Table.No.58.**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Q6	4	1	5	50	2	3	5	50

50% of MEOs said that they have attended the training at District and at State level regarding monitoring and evaluation of CWSN.

**Q7. How much financial help you got from the various schemes for the elevation of CWSN children?**

**Table No.59**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Q7	1	0	1	10	5	4	9	90

90% of the MEO said that they have not got any financial help for the CWSN children.

**Q8. Have you interacted with the parents of the multiple disorder children regularly?**

**Table No.60.**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Q8	6	4	10	100	0	0	0	0

100% of the MEOs said that they are interacting with the parents of multiple disorder children during monitoring and physiotherapy camps.

**Q13. Are you utilizing the services of the IERPs in other educational programs?**

**Table No.61.**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Q13	5	4	9	90	1	0	1	0

90% of the MEOs said that they are utilizing the services of the IERPs for other educational programs rather than IE.

**Q14. Are the parents cooperating in the implementation of HBE?**

**Table No.62.**

Q.No	NO. of respondents (yes )				No. of respondents(no)			
	Male	Female	Total	Percentage	Male	Female	total	percentage
Q14	5	4	9	90	1	0	1	0

90% of the MEOs said that the parents are cooperating in implementation of HBE.

**The Opinion of MEO for open ended Questions:**

**Q1: What is your Primary duty towards the CWSN?**

100% of MEOs said that their primary duty towards the CWSNs is monitoring and supervising IE activities in the Bhavitha Centre and evaluating HBE.

**Q2: What sort of monitoring mechanism is fixed by you?**

30% of the MEOs said they are monitoring monthly once the HBE, another 30% of MEOs said that they are monitoring HBE weekly once, one of the MEO said quite often and 30% of MEOs given no response.

**Q3. What action plan prepared by you for monitoring the Inclusive Education?**

60% MEOs said that to examine IE activities monthly once and suggest steps to improve the HBE activities, 10% of MEOs are instructed IERPs to teach CWSNs with prepared TLM, 20% MEO said the children of CWSN should be mainstreamed with appropriate activities of HBE and 10% of the MEOs said that monitoring should be conducted monthly once.

**Q4. How do you monitor HBE?**

40% of the MEOs said that they monitor through testing speech behavior of the CWSNs and other IE activities. 60% of the MEOs said that they are regularly monitoring IE activities.

**Q10. What material you have supplied for the children with multiple disorders after the identification?**

50% of the MEOs said no appliances were supplied to CWSN. 30% of the MEOs said that they have supplied tricycles, wheelchairs and hearing aids to CWSN children. 20% of the MEOs said they have supplied low cost and no cost material to CWSN children.

**Q11. What action plan you prepared for HBE at the District or mandal level?**

50% of the MEOs said that HBE should be monitor monthly 4 times , 30% of the MEOs said that monthly once HBE should be monitored, and 20% of the MEOs said that SSA IE wing monitoring should be conducted regularly.

**Q12. What are the major reasons for multiple disorder children?**

60% of the MEOs said that early child marriage, cousin marriages, addiction to drugs, alcoholism, pre-post natal and hereditary problems. Remaining 40% of the MEOs are not given any response.

**Q15. What are the challenges you are facing in the implementation of HBE?**

60% of the MEOs said that in order to implement HBE effective for multiple disorder children frequency of HBE classes should be increased and 40% of the MEOs given no response.

**Q16. What suggestions you would like to give for the effective implementation of IE with HBE?**

20% of the MEO said the frequency of HBE should be increase, 20% of MEO said that HBE should be conducted daily by IERPs, 10% of the MEOs said Physiotherapy and speech therapy camps should be alternatively conducted, 10% of the MEOs said every Mandals should have Bhavitha centres and ALIMCO camps will have to be conducted regularly and 10% of the MEOs did not given no responses. And another 10% of the MEOs said HBE should be conducted weekly thrice and another 10% of the MEOs said HBE should be conducted daily and spend more time with the Multiple disorder children parent should be given counseling regularly and provide aids and appliances to the identified CWSNs without due delay.

**Major Findings:**

**Home Based Education Observations And Major Findings Are As Follows:**

1. Under self help skill assessment the independent performers are very less when compare to the dependent performers. It clearly reveals that major work has to be done to develop the self help skills.
2. Under fine Motor skills the dependent and sometime performers are more when compared to good and independent performers.
3. Under the gross motor skills dependents are more in number in compare with other groups such as sometimes, good and independent performers.
4. Under visual tracking skills Dependents and sometime performers are more in number in comparison with independent performers.
5. Under visual motor skills dependent and sometime performers are more than independent performers.
6. Under eye hand coordination skills dependent and sometime performers are more than independent performers.

7. Under visual discrimination category dependent and sometime performers are more than independent performers.
8. Under Auditory perception skills dependent and sometime performers are more than independent performers.
9. Under Kinaesthetic perception skills dependent and sometime performers are more than independent performers.
10. Under tactile perception skills dependent and sometime performers are more than independent performers.
11. Under the communication – receptive skills dependent and sometime performers are more than independent performers.
12. Under the communication – expressive skills dependent and sometime performers are more than independent performers.
13. Under writing skills dependent and sometime performers are more than independent performers.
14. Under Reading Skills dependent and sometime performers are more than independent performers.
15. Under concept skills dependent and sometime performers are more than independent performers.
16. Under Play & social behaviour dependent and sometime performers are more than independent performers.
17. Under Number skills the independents are nil and the dependents are more and sometime performers are also there.
18. Under colours identify skill dependent and sometime performers are more and good and independent performers are very less.
19. Under the time skills category independent performers are nil and the dependent and sometime performers are more in number.
20. Under fruits, vegetables and colours identifying skills independents are almost nil where as dependents are more.
21. Under money concept skill as usual dependents are more than independent and good performers are meagre in number.
22. Under measurement skills good and independent performers are nil dependents are more in number than sometime performers.
23. Under dance and music, vocational training, behavioural problem and other skills independent performers are nil while comparing to dependents and sometime performers.

**Inclusive Education Resource Persons Interview Schedule Major Findings Are As Mentioned Below:**

24. 90.476% of the IERPs are preparing action plan at Mandal level and attending the duty of HBE assigned regularly. This seems the HBE is implementing .The SSA has made an attempt to implement HBE in Mahbubnager district.
25. 100% of the IERPs are identifying multiple disorder children for HBE in the district. This is healthy sign of recruiting resource persons possessing special education degrees and diplomas.
26. 100% of the IERPs are interacting with family members to conduct IE activities.
27. 100% of the IERPs are interacting with Headmasters and school teachers to give awareness of IE activities and seeking cooperation of the school officials for implementation of HBE.
28. 100% of the IERPs are recording CWSN progress in report cards. This gives an idea about the progress in the implementation of HBE and other IE activities in the district.
29. 80.952% of the IERPs not working with NGOs. This shows that the IERPs are not working in this direction. The authorities should take this seriously and take cooperation of NGOs also so that we can effectively implement HBE.
30. 90.476% of the IERPs are not identifying volunteers with the help of NGOs as they are not in touch with NGOs.The SSA has to take initiative in this direction to seek cooperation of NGOs and volunteers for effective implementation of HBE.
31. 100% IERPs are interacting with CWSN parents to help their wards. They are seeking their cooperation to implement HBE to meet its objectives.
32. 100% IERPs are giving skill based training in HBN to their parents as they visit the home only once in week on Saturdays. The frequency of HBN need to be increased as it is not enough to visit one day in week, the purpose may not serve.
33. 100% of the IERPs are participating in medical and awareness camps whenever the SSA taking initiative.
34. 100% of the IERPs are acting as ambassadors of IE to implement HBE and IE activities in the district.
35. 42.857% of the IERPS only attended IE national trainings whereas 57.153% are yet to attend the national trainings. Hence the Government has to train many resource people at national level In order to make them more skilful.
36. 90.47619% of the IERPs explained that they are preparing and conducting the following activities like Flash cards, models, charts, low cost no cost TLM, self help skills, gross motor skills, facial gestures etc. Whereas 9.523% IERPs haven't responded. This shows the job chart of IERPs being implemented.

37. 95.238 % of the IERPs said they play with children, conduct colourful HBE activities give reinforcements and appreciate parents and children in participating IE activities. 4.7629% IERPs were not responded.
38. 100% of the IERPs said that they are going weekly once for HBE. They express their inability to properly implement the said task weekly once. Hence the officials of SSA should increase the classes at least thrice in a week as it is difficult to bring physiological changes in multiple disorder children.
39. Over 61.905% of IERPs expressed that they make the parents attend physiotherapy camps,ALIMCO camps,SADARAM camps and chinnari chupu camps. Whereas 38.095% of IERPs replied negatively.
40. 42.85714% of IERPs attended 1 training,14.285% of IERPs attended 3 trainings,4.76% of IERPs attended 4 trainings,9.523% of IERPs attended 5 trainings,4.76% of IERPs attended 6 trainings and 38.095% were not attended any training.
41. 90.476% IERPs expressed that they are conducting self help skills, time, money, colour, space and number concepts, reading, writing, rhymes, stories etc whereas 9.523% IERPs didn't express anything.

**Interview Schedule for CWSN Parents Major Findings are as follows:**

42. 82.716% parents know from what multiple disorder problem their ward is suffering and 17.283% didn't have any idea about their child problem. Hence more awareness camps have to be conducted in order to identify multiple disorder children and seeking cooperation by parents in order to conduct HBE effectively.
43. 100% of the parents are interacting with IERPs for their child Home based education.
44. 100% of the parents are learning skills from IERPs for supporting their child Home based education.
45. 98.765% of the parents are expressing that there is no NGO support for the improvement of their CWSN child skills.
46. 69% parents have said that they have given training by IERPs for their child home based education.
47. 97.5% of parents said that they have attended medical camps conducted by SSA for CWSN children.
48. 54.3% parents are getting financial help from Govt. and 45.6% are not getting any financial help.
49. 51.85% of the parent's said that they were provided assistive devices to their children.
50. 75% of the parents said that they are creating IE friendly atmosphere in their home.
51. 74% parents agreed that they are cursed being born of CWSN child.
52. 50.6% of the parents said that society is not accepting their CWSN child.
53. 100% Parents are satisfied by the training given by IERPs.
54. 100% Parents have said that there is improvement in their child regarding training given by IERPs.
55. In identifying CWSN problems the parents are responded as follows 30% parents said IERPs, 33% parents responded themselves and 25% parents said by doctors.
56. 100% parents said that the IERPs are regularly coming to their home on Saturdays to conduct HBE for their multiple disable children.
57. 89% of the parents said that IERPs given the training to their wards

**Interview Schedule for Coordinators (MEOs & Sectoral Officers) Major Findings:**

58. 90% of the Mandal Educational Officer said that they have not taken any training regarding IE activities at State and National Level.
59. 50% of MEO said that they have attended the training at District and at State level regarding monitoring and evaluation of CWSN.
60. 90% of the MEO said that they have not got any financial help for the CWSN children
61. 100% of the MEOs said that they are interacting with the parents of multiple disorder children during monitoring and physiotherapy camps.
62. 90% of the MEO said that they are utilizing the services of the IERPs for other educational programs rather than IE.
63. 90% of the MEOs said that the parents are cooperating in implementation of HBE.
64. 100% of MEOs said that their primary duty towards the CWSNs is monitoring and supervising IE activities in the Bhavitha Centre and evaluating HBE.
65. 30% of the MEOs said they are monitoring monthly once the HBE, another 30% of MEOs said that they are monitoring HBE weekly once, one of the MEO said quite often and 30% of MEO given no response.
66. 60% MEO said that to examine IE activities monthly once and suggest steps to improve the HBE activities, 10% of MEOs are instructed IERPs to teach CWSNs with prepared TLM, 20% MEO said the children of CWSN should be mainstreamed with appropriate activates of HBE and 10% of the MEOs said that monitoring should be conducted monthly once.
67. 40% of the MEOs said that they monitor through testing speech behaviour of the CWSNs and other IE activities. 60 of the MEOs said that they are regularly monitoring IE activates.
68. 50% of the MEOs said No appliances were supplied to CWSN. 30% of the MEOs said that they have supplied tricycles, wheel chair and hearing aids to CWSN children. 20% of the MEOs said they have supplied low cost and no cost material to CWSN children.

69. 50% of the MEOs said that HBE should be monitor monthly 4 times , 30% of the MEOs said that monthly once HBE should be monitored, and 20% of the MEOs said that SSA IE wing monitoring should be conducted regularly
70. 60% of the MEOs said that Early child marriages, cousin marriages, additions to drugs, Alcoholism, pre and post natal problems & hereditary and 40% of the MEOs are not given any response.
71. 60% of the MEOs said that in order to implement HBE effective for multiple disorder children frequency of HBE classes should be increased and 40% of the MEOs given no response.
72. 20% of the MEO said the frequency of HBE should be increase, 20% of MEO said that HBE should be conducted daily by IERPs, 10% of the MEOs said Physiotherapy and speech therapy camps should be alternatively conducted, 10% of the MEOs said every Mandals should have Bhavitha centres and ALIMCO camps will have to be conducted regularly and 10% of the MEOs did not given responses. And 10% of the MEOs said HBE should be conducted weekly thrice and another 10% of the MEOs said HBE should be conducted daily and spend more time with the Multiple disorder children parent should be given counselling regularly and provide aids and appliances to the identified CWSNs without due delay.

### **III. SUGGESTIONS**

As per the observations conducted with checklist, the skills such as self help skills, motor skills, perception skills, communication skills, writing, reading, self concept, play and social behavior, number concept, colors identification, time concept, fruits, vegetable, shapes, money, measurement, dance & music, vocational training, behavioral problem and other skills progress recorded is very less. The dependents are 67%, sometime performers are 28%, good 4.5% and independent performers are 0.5%.

1. This clearly indicates that the present implementation of HBE is not sufficient for the Multiple disorder children. The SSA efforts have created a system but the multiple disorder children needs more training for progress of their skills which meet their daily life routine. The same thing was expressed by the sectoral officers, MEOs, Parents and IERPs. Hence the frequency of HBE should be increased. It is better to conduct HBE daily. For this purpose trained volunteers should be recruited and they should be assigned HBE regularly. In order to monitor the HBE the government should fix monitoring mechanism with trained personal in IE activities.
2. Identification of CWSN should be done by conducting medical (SADARAM) camps monthly twice and address the needs of the CWSN by immediate follow up and provide aids and appliances.
3. The transport and escort allowances should be credited in the accounts of the beneficiaries so that they can attend the camps without any hindrance.
4. More and more awareness camps should be conducted with regard to IE.
5. Parent should know why such type of children being born.
6. Awareness programs should be conducted for educating the people to make them to know that CWSN is not contagious diseases. It is the genetic disorder and cousin marriages, it can happen in anybodies family. So it is our duty to cooperate and help CWSN by accepting without inhibitions.
7. IERC centres should be established in every mandal with all facilities so that the parents can easily access the facilities in the centre.
8. IERPs remuneration should be enhance so that they can work with commitment.
9. The SSA of Telangana is not focusing on the NGOs cooperation in this direction of CWSN field. The IERPs are also not seeking help of NGOs and Volunteers in the local area. Hence the government has to take it seriously and seek the cooperation of NGOs.
10. Frequency of Physiotherapy, ALIMCO, SADARAM and other IE activities should be conducted regularly at mandal level with proper advertisement. During SADARAM camps the doctors should identify the CWSN problem and give certificates to the children.
11. Parents should be given skill based training they can regularly look after their CWSN wards even in the absence of IERPs.
12. It is found out during the investigation 50% of the IERPs have not get training at state and national level. Hence it is the duty of SSA to arrange trainings at state and national levels for IERPs.
13. Parents should be given awareness to create CWSN friendly atmosphere in their homes.
14. All the sectoral Officers in the SSA, Dy. Educational Officers, MEOs, DEO should be given training in inclusive education along with skills of regular monitoring so that they can monitor IE activities also whenever visiting Mandal Resource Centre and Bhavitha Centres.
15. The Mandal Educational Officer should fix a action plan for monitoring HBE at mandal level so that it should be effectively implemented.

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