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# Disability Inclusive Scorecard (DISC)

A manual



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### Cover image:

The UN Sustainable Development Goals wheel

Source: [www.in.one.un.org/sdg-wheel](http://www.in.one.un.org/sdg-wheel)





Children and parents with disabilities learning about the Disability Inclusion Scorecard (DISC) process in Ganjam district, Odisha.

## Preface: About the manual

A central task for civil society organisations is to amplify the voices of people who are most excluded and disadvantaged in society. Our manual addresses this challenge by guiding readers through the process of generating and using a Disability Inclusive Scorecard (DISC), focused on educational provision for learners with disabilities.

Children and their families are at the centre of this process, and their experiences are translated into standards by which to assess provision. DISC serves as a chance for reflection on the critical issues in each local context, with providers engaged cooperatively throughout as a pathway to positive change.

The Sustainable Development Goals (SDGs) pledge a world in which “no one is left behind” through the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), in which member states commit to inclusive education for the “full development of the human person”. This project aims to turn these global ambitions and entitlements into meaningful improvements in the daily experience of people with disabilities, through the agency of these people themselves.

The manual guides readers through the key roles, stages and processes involved. Three key constituencies – children with disabilities and their families, disabled people’s organisations, and local service

providers and local administration – work together to identify important aspects of local services, and agree the terms on which to assess them. Through a process that emphasises values of inclusion, deliberation and mutual respect, this set of elements is discussed and graded to generate a practical action plan for change.

This manual focuses on education provision, but the distinctive combination of components in the method have wide application across global efforts to realise the SDGs – not just for persons with disabilities, but with them.

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Trainers and members from organisations of people with disabilities at the completion of the Disability Inclusive Scorecard pilot process in Hazaribagh, Jharkhand.

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## List of acronyms

- **AWC:** Anganwadi centre
- **BRC:** Block resource coordinator
- **CSC:** Community Scorecard
- **CVA:** Citizens Voice and Action
- **DISC:** Disability Inclusive Scorecard
- **EU:** European Union
- **GP:** Gram Panchayat
- **IEC:** Information, education and communication
- **OPD:** Organisation of persons/ people with disabilities
- **RPWD Act:** Rights of Persons with Disabilities Act, 2016
- **RTE Act:** Right of Children to Free and Compulsory Education Act
- **SDGs:** Sustainable Development Goals
- **SDMC:** School Development and Monitoring Committee
- **SEs:** Special educators
- **UNCRPD:** United Nations Convention on the Rights of Persons with Disabilities

## Definitions of terms used in DISC

- **Anganwadi centre:** Early learning childhood centre
- **Compiler:** Collates and synthesises the outputs of various steps of DISC.
- **Coordinator:** Overall person in charge of planning and executing DISC.
- **Facility:** The lowest level of service delivery point. For example, a primary school, a middle school or an Anganwadi centre (AWC).
- **Head teacher:** The head of a primary/ middle school in rural India. In this document, head teacher and principal are used interchangeably.
- **Moderator:** Facilitates the proceedings of DISC.
- **Participants:** Adults and children with disabilities, parents of children with disabilities and members of OPDs.
- **Panchayati Raj institution:** A system of rural local self-government in India.
- **Scribe:** Documents the proceedings of the DISC.
- **Service provider:** All concerned officials at the unit level (primary school, middle school and AWC), village/GP level, block level, district level and state level.
- **Service users:** Adults and children with disabilities.
- **Unit of assessment:** Depending on the objective of the exercise, this can be a single village or a group of villages, a block or even a district. The unit of assessment used in the pilot exercises in the manual, is a group of villages.
- **Volunteer:** Assists the participants in DISC steps.

# Chapter 1: Introduction

## 1.1 Background

The 2030 Agenda for Sustainable Development and commitment to the Sustainable Development Goals (SDGs) in 2015 recognises the need to reach everyone everywhere, especially those who have been too often neglected, such as people with disabilities.

The pledge of Agenda 2030 to 'leave no one behind' presents an unprecedented opportunity for organisations of people with disabilities (OPDs) to unite across India and the world around a common equity and inclusion agenda.

Moreover, Agenda 2030 builds on existing international and national commitments and accountability processes, such as the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), and provides a renewed framework for people with disabilities to advocate for its implementation and monitoring.

India ratified the UNCRPD in 2007. After prolonged lobbying and advocating, India passed the Rights of Persons with Disabilities (RPWD) Act in 2016, which is based on the UNCRPD. This Act recognises 21 categories of disabilities and lays complete emphasis on one's rights – the right to equality and opportunity, to inherit and own property, to home, family and reproductive rights, among others. It also talks about accessibility: setting a two-year deadline for the government to ensure that people with disabilities obtain barrier-free access to physical infrastructure and transport systems. Additionally, it also holds the private sector accountable.







Children with disabilities and their parents discussing the key challenges involved with inclusive education in Ganjam district, Odisha.

A firm way to ensure that people with disabilities are reached, and that disability inclusion remains a priority, is by creating pathways for OPDs to help monitor whether governments are delivering on their promises, and whether what has been laid down in the RPWD Act is being translated into action, especially at the local level. A key pathway to creating an accountability framework at the local level is to have meaningful, inclusive, accessible, collaborative and responsive opportunities created for people with disabilities to gather and present evidence that can help drive effective decision-making towards improving disability inclusion in the implementation of the SDGs.

The EU-supported project 'Building Partnerships for the SDGs: Empowering Disabled People's Organisations', implemented by Sightsavers India, aims to facilitate these opportunities using a Disability Inclusive Scorecard (DISC) that evolved as a combination of the Community Scorecard (CSC) approach and the Citizens Voice and Action (CVA) approach.

DISC helps OPD members and people with disabilities to understand the various provisions for people with disabilities under different government schemes and their fulfilment. It provides a platform for community members with disabilities (children and/or adults) to share their concerns with the service providers and local administration, and also for them to obtain detailed information about different issues faced by people with disabilities, giving them an opportunity to resolve some

of the issues there and then. DISC helps to empower OPD members to hold the system accountable and deliver the commitments mandated as per the RPWD Act and in the context of Agenda 2030/UNCRPD to people with disabilities collectively rather than as individuals.

DISC can be used to assess the quality of any service made available to people with disabilities. DISC can be used in various thematic areas, such as health, water and sanitation, and economic empowerment. This guide uses SDG 4 to unpack the methodology and the process; this goal focuses on inclusive and equitable quality education and the promotion of lifelong learning opportunities for all, eliminating gender disparities in education and ensuring equal access to all levels of education and vocational training for persons must excluded in society, including people with disabilities. In addition, SDG 4 calls for the building and upgrading of education facilities. SDG 4 was selected as it emerged as a priority focus in the context of OPD advocacy efforts.

DISC has been pilot-tested in five districts in India: Sihora in the state of Madhya Pradesh, Hazaribagh in Jharkhand state, Raipur in Chhattisgarh state, Ganjam in the state of Odisha, and Chittorgarh in Rajasthan state for services of AWCs, primary schools and middle schools.

Based on the pilot exercise, this manual has been designed to provide all necessary information to undertake and facilitate DISC at the local level without any obstacles and acts as ready reference material to follow.

Although DISC was pilot tested for three services – namely primary schools, middle schools and AWCs – we have used primary school service for children with disabilities as an example throughout the manual. Tools used for the assessment of the AWCs and middle schools are shared in the separate Annexures document.

This manual is designed to guide OPD members and similar interested parties to conduct DISC for assessment of various services and demand for better inclusion in public service delivery.

The manual is divided into 12 chapters. Chapter 1 sets the context and establishes the need for a tool such as DISC; chapter 2 highlights the salient features of DISC; chapters 3 to 7 detail the steps involved in preparing for and actual implementation of the scorecard; Chapter 8 describes the process of conducting interface meeting. Details on preparation of action plan and documentation of the entire exercise are described in chapter 9 and 10 respectively. Chapter 11 talks about the follow-up activities by OPD; and chapter 12 lists the challenges involved in implementing DISC.

## DISC can be used to assess the quality of any service made available to people with disabilities



# Chapter 2: Disability Inclusive Scorecard (DISC)

This chapter builds on chapter 1, setting the context and need for a tool such as DISC to the key features of the DISC process.

- “DISC aims to situate local-level service provision in global and national development and human rights frameworks.” Agenda 2030 UN CRPD and the Rights and Protections of Persons with Disabilities Act, 2016 (national disability legislation).
- In the context of disability inclusion in SDG implementation, DISC focuses on service users comprised of people with disabilities and their families, rather than wider communities.
- The scorecarding is explicitly rights-based, guided by the UNCRPD and the RPWD Act 2016 using scorecarding as a tool to make people with disabilities aware of – and claim – their entitlements.
- The approach has been piloted before to help wider application and utilisation in other thematic areas in the future.

## 2.2 Objectives

- To bring together service users, service providers and local administration to jointly analyse issues underlying service delivery problems, and to find collaborative ways to address these issues.
- To empower people with disabilities to know and claim their rights, and to increase the ability and accountability of individuals and institutions that are responsible for respecting, protecting and fulfilling those rights<sup>1</sup>.
- To facilitate opportunities for people with disabilities to gather and present evidence that can help drive effective decision-making.
- To provide an inclusive and participatory approach to ensuring disability inclusion in the implementation of the SDGs and also the implementation of the CRPD.

<sup>1</sup>Care about Rights, Scottish Human Rights Commission  
[careaboutrightts.scottishhumanrights.com/whatisahumanrightsbasedapproach.html](https://careaboutrightts.scottishhumanrights.com/whatisahumanrightsbasedapproach.html)

## 2.3 DISC process

Figure 1: DISC process diagram, comprising nine steps that are interactive and informative. See notes on page 14 for more details.





## 1. Planning and preparation

- Stakeholder mapping
- Orientation of community and service providers and local administration on the Right of Children to Free and Compulsory Education (RTE) Act and the RPWD Act
- Orientation of community and service providers and local administration on DISC and their role in it

## 2. Input tracking

- Physical observation
- Interviews with key informants
- Verification of records

## 3. Group meetings to discuss the challenges and to develop indicators with:

- Children with disabilities
- Parents of children with disabilities
- Service providers and local administration
- Women and girls

## 4. Compilation of indicators

## 5. Voting on indicators agreed upon during group meetings

## 6. Compilation of total votes and results

## 7. Interface meeting with all stakeholders

- Presentation of results
- Responses by service providers and local administration

## 8. Preparation of action plan on low-scoring indicators

## 9. Follow-up on implementation of action plan

## 2.4 Gender sensitivity

The tool provides an opportunity to take the specific rights and needs of girls and women with disabilities into account. Also, DISC requires balanced gender considerations while implementing several steps of the tool, through (1) having dedicated focus group discussions among girls and women with disabilities, (2) in selecting women OPD representatives to present the scorecard at the interface meeting, and (3) in ensuring specific action and messaging around gender dimensions in the scorecard follow-up in the joint action plan and advocacy activities.

## 2.5 Accessibility and reasonable accommodation

1. **Selection of facilitators:** In most cases, the team of facilitators is picked from among OPD members. This not only helps to empower them, but also makes it easier for participants as the facilitators are aware of the issues related to people with disabilities.
2. **Sensitising facilitators:** Participants in the DISC process are either people with disabilities or their family members. DISC therefore emphasises the need to choose the facilitation team carefully and to train them properly to be sensitive to this in their planning and conduct of all the steps of DISC.
3. **Venue and other logistics:** Logistics should be planned to ensure accessibility for people with different types of disabilities. The DISC process is implemented in small groups, which makes access to necessary materials easier for all participants. Planning ahead can really help to ensure your selected venue is as accessible as possible. The venue needs to have accessible toilets and be located as close to the community as possible in order to minimise long journeys. There should be enough room to move freely, and the floor should be suitable for wheelchairs to easily move

around. Ideally, people using wheelchairs or walking aids should be able to access all areas of the venue, not just the room where the event is happening.

4. **Seating and other arrangements:** It is very important that all participants be comfortably and conveniently seated in chairs around a table throughout the exercise. It is essential to ensure that comfortable chairs with good back support are provided, and that cushions are made available if chairs don't have back support. Seating must be set up so that people who lip read can see everyone else's face. Other items (such as tea urns, leaflet tables and flipchart stands) should be set up at a height that everyone can access, or be easily moveable.
5. **Time management:** Allocate extra time that might be needed by participants to discuss issues, process their thoughts and engage effectively with the group. Ensure your agenda allows for adequate time to allow all participants a fair chance to engage and contribute.
6. **Assistance to ensure participation:** The DISC facilitation team comprises of volunteers who are trained to help the participants by:
  - Explaining and interpreting the participant's role in every exercise of the DISC process when needed
  - Translating the instructions where necessary
  - Providing sign language interpretation where necessary
  - Assisting participants with physical and visual impairments to get from one place to another for group meetings and voting exercises
  - Assisting participants in any other manner needed to actively take part in the proceedings.
7. **Support persons:** Since some participants, particularly children and

adults with intellectual impairments, may find it difficult to express themselves in this exercise, the design of DISC allows for participation of support persons such as caregivers or parents to assist them to participate optimally. This is to ensure that the concerns of all participants are included in the overall process. However, attention needs to be paid to ensure that these participants are not overshadowed by their caregivers. Meeting the participants with intellectual disabilities and their support persons before the meeting can also be helpful.

## 2.6 Utility and impact of DISC

1. DISC understands the different provisions and entitlements for people with disabilities under different government schemes and its fulfilment for people with disabilities.
2. DISC provides a platform for community members with disabilities (children and/or adults) to share their concerns with the service providers and local administration
3. DISC provides a platform for service providers and local administration to obtain detailed information about different issues faced by adults with disabilities/children with disabilities and an opportunity to resolve some of these issues there and then. This gives the service providers and local administration an opportunity to score the quality of services from their perspective.
4. DISC empowers OPD members to hold the system accountable and to deliver the commitments to people with disabilities as mandated by the RPWD Act in the context of UNCRPD in a collective manner. They find this to be more effective in terms of ensuring facilities to people with disabilities.
5. DISC, as a collaborative process, brings harmony between service users and service providers and fosters future work together.

# Chapter 3: Planning and preparation

This chapter builds on the information shared in chapter 2 regarding the key steps, principles and considerations. Chapter 3 describes the various tasks involved in planning a DISC exercise and the necessary preparatory activities that need to be undertaken before implementing the DISC.

This chapter is divided into 3a and 3b. Chapter 3a describes the logistical planning and preparations, while chapter 3b details the preparation and planning of softer elements necessary for facilitation of the DISC exercise.

## Chapter 3a: Scope, logistics planning and preparation

**Duration:** Completing the planning and preparation stage for DISC can take between **one and three months**.

### Materials needed

Serial no	Materials	Details
1	Stationery	Chart papers, markers, masking tape, soft board pins, notepads, pens/pencils, flex charts if planning to use.
2	Audio-visual equipment	Audio recorder, video camera with tripods where possible, projector, microphone, sound system, laptop.
3	Orientation materials	Handouts/presentation material in local language to be shared with the participants regarding their entitlements about DISC, their roles and so on. The material should be in language that is easy to understand,
4	Food and drink	Snacks or food packets (depending on the time and duration of the exercises), drinking water and some beverages.
5	Toilets	Ensure they are accessible to all the participants.

### 3.1 Defining the scope of DISC

Preparatory activities include deciding on **the scope of DISC** in terms of the services to cover, geographical areas to cover and the groups of people to meet. For this pilot initiative, the scope has been defined as an assessment of services provided at AWCs, primary schools and middle schools for children with disabilities to understand where we stand in terms of implementation of the provisions of the RPWD Act 2016.

There should be meetings with children (both boys and girls) and parents of these children (both mothers and fathers). It would be preferable to also have separate focus group discussions with women and girls.

Letters need to be sent to the concerned senior officials well in advance to ensure their participation in orientation meetings.



Preparation for a small group discussion with the parents of children with disabilities in Hazaribagh district, Jharkhand.

### 3.2 Orientation meetings with service providers, local administration and service users

Preliminary meetings should be held with service providers and local administration to orient them on DISC, how it will be conducted and its potential benefits. This will help to develop trust and promote joint efforts to improve services.

The orientation of service providers and local administration should be followed with meetings with representatives of OPDs, and parents and children (the participants) for the same purpose of explaining what DISC is about, how it will help them and how they can participate.

Some of the key representatives who need to be oriented include:

- School administration: head teacher/principal and other teachers at the schools.
- Members of the School Development and Monitoring Committees (SDMCs).
- Block resource coordinator.
- The Gram Panchayat (GP) president.
- Officials at the block level from the education department.

Figure 2 can be used to explain DISC to the service providers, local administration and service users.



**Figure 2:** DISC process diagram for orientation of service providers, service users and local administration



### 3.3 Identifying the facilitators

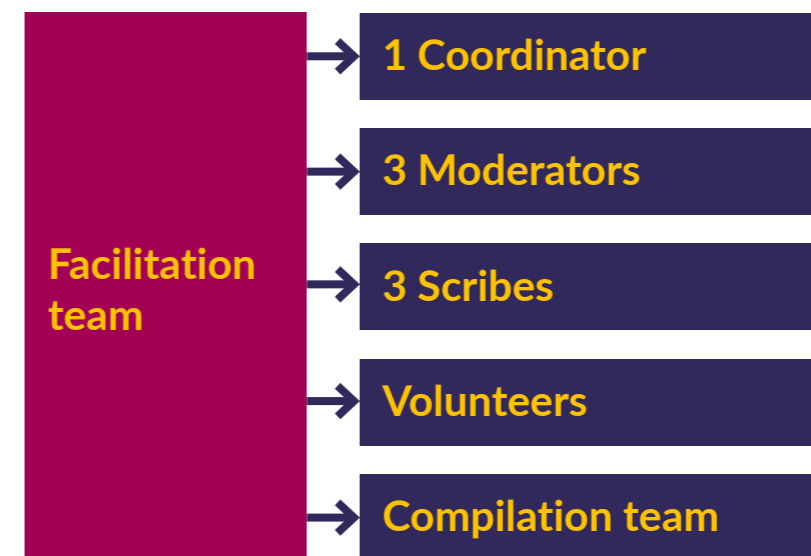
Preparation also includes the **selection of the facilitation team** to conduct DISC meetings. Ideally, these should be OPD members from the same area. There should be one coordinator, three moderators and three scribes in each team for each unit of assessment (GP/block).

**Volunteers:** a team of volunteers (preferably from OPDs) is needed to assist the participants with various activities. The number of volunteers depends on the number of participants. Ideally, there will be one volunteer for every participant who may need assistance.

**Compilation team:** a team of two to three people to help compile indicators and votes is also required for every unit where DISC is conducted (GP/block).

Some general guidelines to keep in mind while choosing the facilitation team:

1. Team members should be fluent in the local language.
2. Team members should not be from the same village as they may influence the proceedings with their own opinions.
3. Facilitators should not give their opinions while facilitating the proceedings, but instead make sure they obtain the opinions of the participants.
4. Team members must be polite, well behaved and courteous.
5. Volunteers should preferably be members of OPDs.
6. The compilation team members should have knowledge of the issues being discussed in DISC meetings, and should have the ability to combine indicators where necessary and prioritise the indicators to arrive at a common list for all the participating groups.
7. It is important to have women members in the team, especially when conducting meetings with other women and girls.



**Figure 3:** Facilitation team for every unit of assessment

### 3.4.1 Roles and responsibilities of each member of the team

#### 1. The coordinator is responsible for the following tasks

**a) Establishing contacts with all concerned stakeholders among the service providers and local administration**

Identify and establish contacts with all relevant stakeholders across the chain of command by orienting them about DISC process and their role in the process.

**b) Selection of participants for group meetings**

Identify potential children who can participate in the exercise and talk to their parents, encouraging them to participate in the exercise along with their children. Form a separate group of women from among these participants, including girls, and encourage them to participate in a separate discussion exclusively for women and girls.

Encourage local OPDs to do this work or, if it is tough to mobilise people, leave it to local organisations and Panchayati Raj institutions members (local self-government) to mobilise participants in advance. The ideal number of participants for each target group is given in the table below.

Contact all concerned officials starting from the facility level (for example, primary school) to the block/district level and sensitise them on the DISC process and the need for their involvement, as well as the role that they will be playing. Contact GP officials as well as elected representatives. During these meetings, explain to them what DISC is and how and why they should get involved in this exercise.

Target group	Number of participants
Children with disabilities	5-8
Women and adolescent girls with disabilities	5-8
Parents of children with disabilities	10-12
Service providers and local administration	All concerned officials from local unit level to state level as required.  For each service, the number of service providers and local administration participating should not exceed 10-12 members.  If more than one service is being assessed, it is advisable to have separate groups of service providers and local administration for each service so the groups remain small and manageable.

**c) Selection of venue for meetings and invitation to participants for the meetings**

In consultation with village officials, carefully select a venue for meetings with the participants. This should be a place that is:

- Easy to reach for participants.
- Comfortable to sit in and talk as a group.
- Convenient for the moderator and scribe.
- Accessible with facilities for people with disabilities.

Contact and inform the selected participants of the venue and time of the meeting. If the venue is a large hall, it can be partitioned for different groups to meet. Community halls, school premises or private halls given for free by request can be good options to consider.

**d) Select a convenient location for the interface meeting**

This location should be convenient for both the service providers, local administration and the participants. It could be near the school so that the officials are not away from work for too long. Make sure that at least one representative of the service provider is present at the interface meeting.

**e) Facilitation of all meetings**

Help the moderators while they are conducting meetings with a flip chart, papers, marker pens, note pads and recorders. Take photographs of every meeting and film each meeting in clips, having obtained consent from the participants. Voting can be done on flex charts prepared in advance – indicators can be written in during DISC.

#### 2. Moderators

Three moderators are to be allocated to each unit of assessment where DISC is conducted. One moderator should be assigned to each of the following participant groups:

**Group 1:** Children with disabilities

**Group 2:** Parents of children with disabilities

**Group 3:** Service providers and local administration

The group discussion held among women and girls will be a sub-group from the same participants. One of the three moderators (preferably a woman) could be assigned the task of conducting this group discussion.

The role of the moderator includes the following.

**a) Conducting input tracking**

Each moderator will do the input tracking for the services being assessed (such as primary school services). Details on how to conduct input tracking is shared in subsequent chapter on input tracking in the manual. Depending on the availability of stakeholders, the input tracking could be a group exercise or a one-on-one exercise.

**b) Conducting the meeting**

The moderator must facilitate the discussion, engage the group and elicit maximum information from them, guide them through the entire process of DISC as detailed in the subsequent chapters of the manual and be responsible for all facilitation required in implementing DISC.

**c) Documentation**

After the meeting, have a discussion with the scribe and make sure all that was discussed has been recorded in the notes and the charts.



### 3. Scribes

Three scribes are to be allocated to each unit of assessment where DISC is conducted, similar to the moderator. One scribe should be assigned to each of the following participant groups:

**Group 1:** Children with disabilities

**Group 2:** Parents of children with disabilities

**Group 3:** Service providers and local administration

The discussion with women and girls is conducted as a side meeting among the same participants. One of the three scribes (ideally a woman, as women and girls may not feel comfortable talking in front of a male scribe) can assist one of the three moderators in documenting the discussion for this particular group.

A scribe must have good documentation skills. They will need to record all proceedings of every meeting in their notebook.

#### a) Preparation of indicator list

- Keep a blank chart ready for writing down indicators.
- Make notes and write the indicators.

#### b) Audio recording of proceedings

Scribes must make an audio recording of all proceedings at every meeting, and guide the coordinator to film proceedings.

#### c) Discussion with moderator at the end of meeting

At the end of the meeting, the scribe should have a discussion with the moderator to verify whether all that was said was recorded, all formats filled and all required outputs obtained.

#### d) Preparation of the unit report

In consultation with the moderator and the coordinator, the scribe must prepare the report for each unit in the template provided.

### 4. Volunteers

Select a team of volunteers who will assist the participants to actively participate in the DISC process. These volunteers should preferably be OPD members or any other members from the village. Ideally, one volunteer will be assigned to every participant who needs assistance. If it is difficult to obtain this many volunteers, it is good to have one volunteer for every two to three participants. The following tasks are to be performed by the volunteers:

- Explain and clarify the participant's role in every exercise of the DISC process when needed.
- Translate the instructions where needed.
- Guide participants from one place to another for meetings and voting.
- Provide any other help needed by the participant to actively take part in the proceedings.

### 5. Compilation team

A team of two to three members from the OPD who have knowledge of the issues being discussed should be selected for the compilation team. The tasks of the compilation team are as follows:

**Preparing the charts for voting:** The members of this team will make the final list of indicators by compiling the inputs received from each of the participating groups.

**Preparation of results sheet for interface meeting:** After all the indicators have been voted on by the participant groups, the team will compile the results and prepare the charts for use in the interface meeting. More details on how to do this are shared in subsequent chapters of this manual.



The compilation team, comprising two women OPD members, prepares the results sheet for the interface meeting in Chittorgarh district, Rajasthan.

## Chapter 3b: Facilitation tips for implementation of DISC

### 3.5 Training the facilitation team

**Training on DISC methodology:** The facilitation team must be trained on the different steps in DISC and the role that each one of them has to play in this process prior to the actual exercises. A typical agenda for training is given in Annexure 1. This can be used to train the facilitation team to conduct DISC for more than one service.

**Orientation on entitlements:** Apart from training the team in the DISC process, the team must also be oriented on the entitlements of people with disabilities. The information collected during the planning and preparation stage related to various entitlements to people with disabilities under various government schemes should be shared with the team. This will ensure every member of the team is informed about their entitlements and is equipped to assess the quality and accessibility of

mainstream services available to adults and children with disabilities in a more effective and objective manner. The information related to entitlements with respect to a particular service could vary from state to state, which is why information relevant to the state where DISC is being implemented has to be shared with the team members.

**Key points to be shared with the team from the legislation with regard to education as an example are given in Annexures 5a and 5b. Example of entitlements related to education services for children with disabilities in Chhattisgarh state is given in Annexure 5c.**

## 3.6 Tips for facilitation<sup>2</sup>

### 1. Building rapport

**Context setting:** Facilitators must clearly explain the nature of the exercise in a way that is understandable to the participants. Communicate how information obtained during the exercise will be used. It is helpful to make sure there is sufficient time to answer any questions that individuals may have before commencing the exercise.

**All are learners, all are teachers:**

Participants invited to the exercise are considered to be direct receivers of services (in this case, education) and have vital information to share with us that can help us assess:

- the quality and accessibility of services provided.
- gaps that need to be addressed.
- important suggestions that they have to offer can help improve the service delivery.

Let them know that you are there to learn from them too. Expressing this to participants helps to establish a respectful appreciation for the valuable contributions that they will make to this exercise.

**Awareness and background knowledge:**

First, become familiar with the critical issues affecting the community represented by participants. As the facilitator, you are there to learn from participants. However, you need a basic awareness of sensitive issues so you do not offend or insult participants unknowingly or unintentionally. This is especially important in the case of people with disabilities.

**Balancing rapport and professionalism**

is very important. Your role is not that of a good conversationalist or a friend who provides feedback, but that of a professional. If you are too casual, participants may not see you as someone who is prepared to take what they have to say seriously. However, if you are too formal, participants may feel intimidated and may not be as willing to reveal information. Try to achieve a balance between being formal and casual during your facilitation.

**Recognising and appreciating participants**

for their time and contribution is one of the most important things you can do to help build rapport. Remember to thank them for their time and participation. Let them know that the information they have shared is valuable.

### 2. Listening skills

**Good listening is key to the collection of useful information:** Being a good listener means being an interested listener. This is achieved by demonstrating that you are paying attention to what participants are sharing, staying neutral or impartial, and practising appropriate silence.

**Look around while you listen:** While listening, do not only hear what someone is saying, but also notice their body posture and facial gestures (meaning any changes in non-verbal behaviour). These might provide cues as to the appropriate or necessary ways to engage participants.

**Heed while you listen:** Show participants that you are listening to what they are saying. Signs that you are paying attention may include leaning forward slightly, looking directly at participants while they are speaking, or nodding at appropriate times. Such behaviours not only indicate that you, as the facilitator, are more engaged, but also maintains the engagement of the participants.

**Remain unbiased or impartial while posing questions or probing for more information:** If participants sense that you have an opinion, they may want to change their responses so that they will seem more socially desirable, rather than reflect what they truly believe or feel about a topic.

**Know when to talk and when to keep silent:** Maintaining silence at times encourages participants to share details or express themselves better because it gives them a chance to think about what they want to say. More often than not, participants will fill silences with more information. However, it is important to strike a balance between keeping the conversation moving (so that you use your time well) and allowing participants adequate time to share and process what has been shared, too.

### 3. Probing

Where necessary, probe the participants for more information. But in doing so, remember to use words that do not influence them with your own ideas, and try to be impartial. This is crucial. Use this technique particularly when participants are giving one-word or one-sentence responses. This will help to get more information, especially qualitative information. Do not ask leading questions. For example, a question beginning with “don’t you think...” reflects that you already have an opinion. This can lead participants to align with your opinion instead of

expressing their own opinion and/or experience. A few suggested techniques are:

- Repeat the question: repetition gives participants more time to think
- Pause for the answer: a thoughtful nod or expectant look can convey that you want a fuller answer
- Repeat the reply: hearing it again sometimes stimulates conversation
- Ask when, what, where, which, and how questions: they provoke more detailed information
- Use neutral comments, such as: “Anything else?”

### 4. Time management

Time management is perhaps one of the most challenging aspects of the exercise, yet is also a very important aspect that influences the exercise’s success.

**Probe insightfully to avoid digressing:** Individuals love to talk about their experiences and may sometimes have a tendency to talk excessively. In such situations, you should probe insightfully so that you get the level of detail you need to bring the discussion back on track. At the same time, ensure that no single participant takes up too much time.

**Everyone must have a say:** Ensure that every participant gets a chance to express their point of view if they wish to, and that no single person or group of people dominates the discussion. A good way to do this would be to ask for alternative views. For example, the facilitator can raise another issue, or say “we have had an interesting discussion, but let’s explore other ideas or points of view. Has anyone had a different experience that they wish to share?”

<sup>2</sup> [www.nyla.org/max/userfiles/Documents/D.\\_Focus\\_Group\\_Toolkit.pdf](http://www.nyla.org/max/userfiles/Documents/D._Focus_Group_Toolkit.pdf);  
[www.interpretereducation.org/wp-content/uploads/2015/02/NCIEC\\_focus\\_group\\_manual\\_07-2012.pdf](http://www.interpretereducation.org/wp-content/uploads/2015/02/NCIEC_focus_group_manual_07-2012.pdf)



### **Politely avoid irrelevant conversation:**

If the participant is sharing information that is less useful to the objective of the exercise, it is your job to politely move the discussion forward. Sometimes, it is possible to do this by listening to something that the respondent is saying that is relevant to another question or set of questions. Other times, you may want to acknowledge that your time together is running out, there are some other aspects that you want to discuss and that you want to ensure there is enough time to do so. Promise the participant that if time permits, they will be given another chance to share the experience once again.

### **Familiarise yourself with the checklist:**

This will guide you to conduct the exercise smoothly. If you do run out of time before you have covered all the aspects from the checklist, use your remaining time asking and exploring only the most important remaining questions. The more familiar you are with the guide, the easier it will be for you to prioritise particular questions and to recognise when the participants have already provided relevant information.

## **5. Accessibility and reasonable accommodation**

The participants in the DISC process are people with disabilities and/or their family members. Therefore, the facilitation team must be sensitive to this and plan all logistics accordingly. It must be ensured that the venue is accessible, that a sign language interpreter and/or velotypist has been booked in advance if needed, and that any visual material used is also explained orally for people with visual impairments.

Be mindful that participants with different types of disabilities may require specific aids and supports to enable them to actively participate in the process. At the beginning of the workshop, it is worth

asking everyone if they feel included and if any other support or reasonable accommodation could be taken.

Be mindful of any extra time that may be needed. Many of the participants may require extra time and assistance in engaging with the issue, processing it, then reacting and responding.

Remind the volunteers to say/read/write only as instructed by the participant or yourself (moderator) and discourage them from using their opinions and/or experiences to influence the participants' responses and reactions.

Throughout the DISC exercise, it is important that all the participants be seated in chairs around a table, making it convenient for all.

## **6. Ground rules**

The following are some recommended guidelines or ground rules that help establish the group norms:

- Only one person talks at a time.
- It is important for us to hear everyone's ideas and opinions. There are no right or wrong answers – just ideas, experiences and opinions, all of which are valuable.
- It is important for us to hear all sides of an issue – both the positive and the negative.
- It is important for women's and men's ideas to be equally represented and respected.
- These ground rules may be presented to the group and displayed throughout the discussion, on a flip chart if possible.

## **7. Additional guidelines for scribe**

### **Observation and crosschecks on moderators**

- Scribes must pay keen attention to the proceedings.
- Scribes must ensure the moderator follows the procedures.

**Observation:** as well as noting down what the moderator and the respondents say, a scribe must also do the following and make notes about them:

- Observe the environment during the meeting.
- Observe the expressions on the faces of the participants.
- Observe the dynamics among the community and the service providers and local administration.

## **8. Important instructions to volunteers**

- Do not influence the participant in the decision-making process with your personal views or experiences.
- Do not use harsh words when communicating with the participant.
- Translate or read only what has been shared by the moderator, and do not add any text based on your own discretion.
- Write, vote and act only as instructed by the participant and in accordance with the participant's will.

## **3.7 Outputs and outcomes of this exercise**

1. Facilitation teams have been identified and trained on the DISC process.
2. Team members have been made clear about their roles in the DISC process.
3. The participants have been selected – children with disabilities and their parents, OPD members and service providers and local administration.
4. Orientation of the selected participants has taken place about their roles and about DISC itself.
5. Selection of the venue has taken place and other logistics regarding accessibility have been addressed.
6. Preparation of materials required to conduct DISC, such as chart templates, formats and so on, has taken place.

## **Participants with different types of disabilities may require specific aids and supports**

# Chapter 4: Input tracking

After planning and preparing to conduct the DISC exercise as described in the previous chapter, the first step in implementing the DISC is input tracking. This chapter details all the steps.

**Duration:** The input tracking exercise can be completed in **one month**. All three components of input tracking can be conducted simultaneously for each service being assessed.

### Materials needed

Serial no	Team/materials required	Number per unit	Total numbers
1	Moderator	3	3
2	Scribe	3	3
3	Volunteers	As determined by the moderator	As determined by the moderator
4	Participants	All OPD members, people with disabilities and children with disabilities, with their parents, service providers and local administration who have been identified during input tracking.	All OPD members, people with disabilities, children with disabilities along with their parents, service providers and local administration who have been identified during input tracking.
5	Physical observation formats	One per facility	Actual number of facilities to be observed at the unit of assessment
6	Key informant interview formats	Users: 2 Officials: 5-6 (or as available)	
7	Formats for verification of records	One per facility	Actual number of facilities observed physically at the unit of assessment



The water, sanitation and hygiene facilities at a school building in Madhya Pradesh.

## 4.1 Why input tracking?

Input tracking is an important step that builds the foundation for DISC, as it helps us to understand the current status of services available to people with disabilities. Aspects of service delivery include:

- Access to the facilities (for example, primary school).
- Profile of service users (for example, children attending these schools).
- Services available to people with disabilities at these facilities.
- Availability of infrastructure such as buildings, water supply, electricity, toilets and so on, and its accessibility to people with disabilities.
- Availability of teaching aids such as books, play materials and so on, and their accessibility to children with disabilities.
- Behaviour of other children towards children with disabilities.
- Training given to teachers on inclusion of children with disabilities.
- Implementation of the provisions of government schemes for people without disabilities and adherence to government mandates in these institutions for children with disabilities.
- Inflow and outflow of funds for these institutions and its utilisation.
- Transparency, participation and accountability in these institutions.



## 4.2 Who does the input tracking?

The moderator assigned to every unit of assessment is responsible for input tracking. They can be assisted by the scribe and/or volunteer in input tracking.

## 4.3 How is input tracking done?

Input tracking is carried out using three methods: physical observation, verification of records and key informant interviews.



Figure 4: Methods of input tracking

### 4.3.1 Physical observation

- Actual observation of the physical structure or premises to record the availability of infrastructure, accessibility and quality/condition of the infrastructure. Apart from recording the physical infrastructure available, another important aspect of this exercise is recording behavioural aspects such as the attitudes of staff and fellow students towards people with disabilities.
- Where possible, it is preferable to compare the current status with the stipulated norms. General observations are to be made in an unbiased manner. Detailed notes can record all the aspects observed and this qualitative information gathered can be very useful in subsequent steps of DISC. Where possible, photo documentation is always beneficial.

- It is also good practice to record case studies where possible, using either audio or video. Though anecdotal in nature, these help to provide perspective to the observed facts in the larger context.
- At least one facility from each participating village must be included for physical observation.

**The formats to be used as guidelines for conducting physical observation exercises in AWCs and middle schools are in Annexures 2a and 2b.**

Table 2: An example of physical observation output

Primary school:				
Village:				
GP:				
Block/district:				
Moderator:				
Scribe/volunteer:				
Serial no	Input indicator	Entitlement/norm	Actual	Remarks/observations
1	Availability of separate building	There should be a separate building for the school.	There is a building.	
2	Condition of the building	Good quality (solid and permanent) building.	Good quality a (solid and permanent) building is there.	Condition is not good with punctured walls and roof. Floor is also broken in some places.
3	Building accessibility to children with disabilities (ramps, hand rails and so on)	Ramp with rails as per the building code should be available.	Ramp is available. No railing.	Ramp slope is too steep and not as per the norm. Wheelchair access is difficult.
4	Availability of sufficient number of classrooms	Separate room for each class.	There are only two rooms.	Classrooms are not in sufficient numbers. 2-3 classes are held in the same room by seating them in groups apart.
5	Availability of seating for children with disabilities	Tables and chairs should be available.	Furniture is not available. Children sit on the floor.	Children with disabilities are finding it difficult to sit on the floor.
6	Availability of teaching aids for children with disabilities	Teaching aids for children with all kinds of disabilities are to be available.	Kit for blind children is available, but not for other types of disabilities.	Even the kit available for blind children is not opened and teachers do not know how to use it.
7	Availability of special educators	Sufficient number of special educators for children with all kinds of disabilities must be available for all schools.	Special educator is available.	Special educator is trained to teach only blind children and is not able to support children with other disabilities.
8	Availability of kitchen	Every school should have a kitchen.	Available	

Serial no	Input indicator	Entitlement/norm	Actual	Remarks/observations
9	Availability of toilets for children with disabilities, and their functionality	Every school should have a functional toilet accessible for children with disabilities.	Toilet available.	The toilet is not accessible to children with disabilities.
10	Availability of water in toilets	Water should be available for the toilet as either stored or piped supply.	Stored water is available.	Difficulty in accessing the stored water for children with disabilities.
11	Availability of soap	Soap should be available in the toilet.	Soap is not available in toilet.	Soap is available with the head teacher.
12	Availability of dustbins	Dustbin should be available in the toilet.	Dustbin is available in toilet.	
13	Availability of drinking water and its accessibility to children with disabilities	Filtered drinking water should be available.	The school has an Aquaguard filter for drinking water.	It is accessible to children with disabilities.
14	Cleanliness of the school premises and its surroundings	School should be kept clean without littering.	School is clean.	Because the school does not have a compound wall, garbage from surrounding houses is thrown into the school surroundings.
15	Behaviour of students towards children with disabilities	Children are expected to treat children with disabilities as equals.	Most children are friendly, but some are not.	
16	Behaviour of teachers and other staff towards children with disabilities	Teachers are trained and aware on how to support children with disabilities to fully participate in class.	Most teachers are not compassionate and patient with children with disabilities.	Teachers address children with disabilities by their disability rather than by their name.

### 4.3.2 Interviews with informants

One-on-one interviews with the concerned officials and representatives from the community must be conducted to get their feedback on the existing quality and status of services available.

For primary schools, one or two people from the following categories should be interviewed to collect the data:

- Users: children with disabilities and parents of children with disabilities
- Head teacher
- Special educators

- School Development and Management Committee (SDMC) member
- Block Resource Coordinator (BRC)

The formats to be used as guidelines for conducting key informant interviews for AWCs and middle schools are annexed in Annexures 3a and 3b.

The following tables show an example of key informant interviews for primary school. (Note: responses are highlighted in yellow.)

**Table 3:** Interview schedule for users: primary school

**Instruction:** Talk to the children with disabilities who attend primary school and (or) their parents

Code	Questions	Responses
1	Name of primary school	
2	Name of village	
3	Name of GP	
4	Name of block/district	
5	Name of moderator	
6	Name of scribe/volunteer	
7	Respondent is a	1 Student attending the school 2 Parent of a child attending the school
8	Is there a separate building for school?	1 Yes → Go to question 10 2 No
9	Where is the school functioning currently?	
10	What is the condition of the building?	1 Good 2 Average 3 Dilapidated
11	Is there a ramp for children with disabilities to access the building?	1 Yes 2 No → Go to question 13
12	Is the ramp functional and as per specifications?	1 Yes 2 No



Code	Questions	Responses
13	Does the school have seating accessible to children with disabilities?	1 Yes
		2 No
14	Are there sufficient teaching aids for children with disabilities?	1 Yes
		2 No
15	Does the school have special educators to teach children with disabilities?	1 Yes
		2 No
16	Is there a facility for drinking water in school?	1 Yes
		2 No → Go to question 18
17	What is the source of the drinking water?	1 Bore well
		2 Public tap
		3 Piped supply
		4 Well
		5 Others
18	Is there a toilet facility in the school?	1 Yes
		2 No → Go to question 22
19	Does the school have toilets for children with disabilities?	1 Yes
		2 No
20	Are the toilets functional?	1 Yes
		2 No
21	Is there provision of water for use in the toilet at the school?	1 Yes
		2 No
22	Is there hand washing facility in the school?	1 Yes
		2 No → Go to question 24
23	Is the hand wash accessible to people with disabilities?	1 Yes
		2 No
24	Is the school providing soap for hand washing?	1 Yes
		2 No
25	Does the school provide dustbins in class, toilets and at other appropriate locations for collection of waste?	1 Yes
		2 No
26	Are the school premises and classroom(s) cleaned every day?	1 Yes
		2 No
27	Are you satisfied with the behaviour of school staff towards children with disabilities?	1 Satisfied
		2 Dissatisfied
<b>Any other observations or notes</b> 1. Soap is available with the school's head teacher and is given to children when requested. 2. There is no specific handwashing facility. The stored water outside the toilet is used for hand washing as well.		

**Table 4:** Interview schedule for service providers: primary school

**Instructions:** Talk to the head teacher

Code	Questions	Responses
1	Name of primary school	
2	Name of village	
3	Name of GP	
4	Name of block/district	
5	Name of the moderator	
6	Name of the scribe/volunteer	
7	Name of the head teacher	
8	Is there a separate building for school?	1 Yes → Go to question 10
		2 No
9	Where is the school functioning currently?	
10	What is the condition of the building?	1 Good
		2 Average
		3 Dilapidated
11	Is there a ramp for children with disabilities to access the building?	1 Yes
		2 No → Go to question 14
12	Is the ramp functional and as per specifications?	1 Yes
		2 No
13	Does the school have seating accessible to children with disabilities?	1 Yes
		2 No
14	Are there sufficient teaching aids for children with disabilities?	1 Yes
		2 No
15	Does the school have special educators to teach children with disabilities?	1 Yes
		2 No
16	Is there a facility for drinking water in school?	1 Yes
		2 No → Go to question 18
17	What is the source of drinking water?	1 Bore well
		2 Public tap
		3 Piped supply
		4 Well
		5 Others
18	Is there a toilet facility in the school?	1 Yes
		2 No → Go to question 22
19	Does the school have toilets for children with disabilities?	1 Yes
		2 No

Code	Questions	Responses
20	Are the toilets functional?	1 Yes
		2 No
21	Is there provision of water for use in the toilet at the school?	1 Yes
		2 No
22	Is there a hand washing facility in the school?	1 Yes
		2 No → Go to question 24
23	Is the hand washing facility accessible to people with disabilities?	1 Yes
		2 No
24	Is the school providing soap for hand washing?	1 Yes
		2 No
25	Does the school provide dustbins in class, toilets and at other appropriate locations for collection of waste?	1 Yes
		2 No
26	Are the school premises and classroom cleaned every day?	1 Yes
		2 No
27	Are there sufficient funds to run the school?	1 Yes
		2 No
28	Are there problems that you face in providing education to children with disabilities in your school?	1 Yes
		2 No → Go to remarks and suggestions
29	Nature of problems	1. Not enough special educators are available to help in teaching children with different disabilities. 2. Teachers are not all trained to include and teach children with disabilities.
<b>Any other remarks or suggestions</b> 1. Teachers should be trained to include and teach children with different disabilities. 2. Dedicated special educators have to be assigned to schools. 3. The allocation of funds has to be revised for better upkeep of the school as well as to make provisions for better seating for children with disabilities.		

**Table 5:** Interview schedule for SDMC members: primary school

**Instructions:** talk to a member of the School Development and Monitoring Committee (SDMC)

Code	Questions	Responses
1	Name of primary school	
2	Name of village	
3	Name of GP	
4	Name of block/district	
5	Name of the moderator	
6	Name of the scribe/volunteer	
7	Name of the respondent	
8	Is there a functional SDMC?	1 Yes
		2 No → Go to question 10
9	Are there regular inspections of schools by SDMC members?	1 Yes
		2 No
10	Is there a ramp for children with disabilities to access the school building?	1 Yes
		2 No → Go to question 12
11	Is the ramp functional and as per specifications?	1 Yes
		2 No
12	Do the SDMC members discuss issues related to children with disabilities in their meeting?	1 Yes
		2 No → Go to question 14
13	What were the last three discussions related to the issues of children with disabilities?	1. 2. 3.
14	Are there any problems that you face in providing education to children with disabilities in schools?	1 Yes
		2 No → Go to remarks and suggestions
15	What is the nature of these problems?	
16	What are the facilities provided for children with disabilities as an effort from SDMC or actions taken by the SDMC to resolve issues concerning children with disabilities?	None
<b>Any other remarks or suggestions</b>		



**Table 6:** Interview schedule for BRC: primary school

Code	Questions	Responses
1	Name of respondent	
2	Designation	BRC
3	Name of village	
4	Name of GP	
5	Name of block/district	
6	Name of the moderator	
7	Name of the scribe/volunteer	
8	Are there separate buildings for schools in your block?	1 Yes → Go to question 10
		2 No
9	Where are the schools functioning currently?	
10	What is the condition of the building?	1 Good
		2 Average
		3 Dilapidated
11	Is there a ramp for children with disabilities to access the school building?	1 Yes
		2 No → Go to question 13
12	Is the ramp functional and as per specifications?	1 Yes
		2 No
13	Are there sufficient funds to run the schools?	1 Yes
		2 No
14	Are there any problems that you face in providing education to children with disabilities in these schools?	1 Yes
		2 No → Go to question 16
15	Nature of problems	Due to lack of availability of sufficient special educators, it is difficult to provide dedicated special educators to every school.
16	Do you regularly monitor the activities of the schools?	1 Yes
		2 No
<b>Any other remarks or suggestions</b>		

### 4.3.3 Verification of records

This method of input tracking is used to understand:

- the profile of users of the facilities (for example, primary schools).
- the availability and sufficiency of staff at these facilities.

- the availability and use of funds, especially towards people with disabilities.

The formats to be used as guidelines for verification of records at ANCs and middle schools are annexed in Annexures 4a and 4b.

Here is an example of a verification of records template for primary schools

**Table 7:** Interview schedule for BRC: primary school

**Instructions:** Talk to head teacher

Code	Questions	Responses				
1	Name of primary school					
2	Name of village					
3	Name of GP					
4	Name of block/district					
5	Name of the moderator					
6	Name of the scribe/volunteer					
7	Name of the head teacher					
8	Total children attending the school`	Boys: 100 Girls: 80 Scheduled caste: 40 Scheduled tribe: 60 Other backward castes: 50 General: 30 Physical impairment: 5				
9	Details of assets for children with disabilities	Asset details	Numbers			
		Seating	None			
		Ramp	1			
		Teaching aids	3			
10.	<b>Details of funds specifically earmarked for providing facilities and services to children with disabilities</b>					
Serial no	Source of fund	Amount allocated INR	Amount received INR	Amount expensed for (describe the items/ activities for which the funds were used)	Utilisation report submitted to: (specify the person who prepares the report, who verifies the report and who submits the report; also the frequency of submission)	Funds sufficient (yes/no)
1	State government transportation fund	25,000/-	25,000/-	Transportation allowance for children with disabilities	Block education officer	Yes

## 4.4 Outputs and outcomes from this exercise

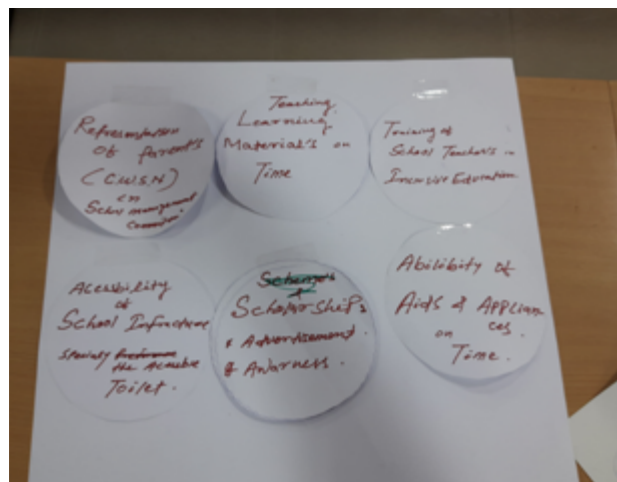
- To fill in input tracking matrices and questionnaires.
- To obtain a clear understanding of the existing status of services for children with disabilities (for example, in primary schools).

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Two OPD group leaders arrange and review key issues that emerge from group discussions in Hazaribagh, Jharkhand.

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Issues and gaps identified from group discussions in Gajnam, Odisha.

## Chapter 5: Group meetings

After finishing the input tracking as detailed in Chapter 4, the next step in the process is to conduct group meetings among different stakeholders. This chapter gives the details on how to conduct these meetings.

**Duration:** The group meeting exercise will take about **two hours** to complete.

### Materials required

Serial no	Team/materials required	Number per group	Total numbers
1	Coordinator	-	1
2	Moderator	1	3
3	Scribe	1	3
4	Volunteers	As designated during volunteer training.	As designated during volunteer training.
5	Participants	All OPD members, people with disabilities, children with disabilities and their parents, service providers and local administration who have been identified during input tracking.	All OPD members, people with disabilities, children with disabilities and their parents, service providers and local administration who have been identified during input tracking.
6	Attendance list	1	3
7	Participant group name boards	1	4
8	Presentation/charts for orientation on entitlements	-	1
9	Flex/chart paper for indicators	1	3
10	Flex/chart paper for indicators for compilation team	-	1
11	Marker pens	2	6
12	Audio recording device	1	4
13	Video recording device	-	1



## 5.1 Setting the context

Group meetings are the first set of exercises conducted as part of the two-day DISC exercise where maximum interactions happen, and issues are discussed and prioritised. Prior to this exercise, the OPD members should be briefed on their roles (i.e. moderator, scribe, volunteer,

compiler) as explained in chapter two on preparation and planning. OPD members will be facilitators as well as participants in one group or the other. Group meetings involves a five step process as shown in figure 2. Each step is explained in detail in this chapter.

**Figure 5:** Pictorial representation of group discussion exercise

**Note:** all five steps must be repeated for every service being assessed



The attendance of participants from different villages must be ensured, and necessary arrangements for their transportation must be made. Use the participants list below to capture the –details of the participants.

**Table 8:** Attendance format

Date:					Place	
Venue details:						
Facilitation team: Moderator:					Scribe:	
Serial no	Name	Village name	GP name	OPD affiliated to	Name of volunteer assigned (if applicable)	Signature

Proceedings will begin by organising participants into **three** groups at different tables. Seating should be clearly marked using name boards. One of the tables can later be used for discussions with the women and girls only, or a separate table can be set up for them.

**Group 1:** Children with disabilities

**Group 2:** Parents of children with disabilities

**Group 3:** Service providers (for example, primary school)

**Step 1 and Step 2 are addressed to all participants** by the facilitator, who can be one of the three designated moderators with more experience and overall knowledge of the objectives of the exercise.

## 5.2 Step 1: Welcome

Once the participants are grouped, the moderator will begin the proceedings by welcoming them all.

## 5.3 Step 2: Orientation of participants

Two sets of information should be shared in the orientation exercise:

1. The results of the input tracking exercise and key learnings: observations made, feedback obtained from all the concerned stakeholders, what is working fine, what is not working fine, expectations and satisfaction levels.
2. Excerpts from the RPWD Act 2016, Article 24 CRPD and SDG 4 should also be explained to the participants before the exercise starts. Any other relevant legal documents (Right to Education Act 2009, in this case) should also be shared with the participants, clearly explaining their rights and entitlements. This is critical before moving forward in the DISC exercise as it ensures all participants understand their legal entitlements.
3. **Orientation on entitlements:** Information collected during the planning and preparation stage related to various entitlements for children with disabilities and people with disabilities under various government schemes should be shared with the participants so they are well informed about their entitlements. They will therefore be equipped to assess the quality of services available to them more effectively and objectively. The information on entitlements with respect to a particular service could vary from state to state; information relevant to the state where DISC is being implemented must be shared with the participants.

Examples of key points to be shared with the participants from the Acts with regard to education as an example are given in Annexures 5a and 5b. An example of entitlements related to education services for children with disabilities in Chhattisgarh state is given in Annexure 5c.

**Step 3 is conducted in individual groups.** The designated team of moderator, scribe and volunteers takes over from here and facilitates the exercises.

## 5.4 Step 3: Indicator development

The DISC process is built around the collective identification of key indicators. An indicator has to be defined in such a way that there is no negative or positive connotation to it, and it is neutral. It is a measure, not a description, of the status of service or the service itself. For example, drinking water or non-availability of drinking water are not indicators, but the availability of drinking water is an indicator. Other examples could be the availability of a ramp, quality of a ramp, availability of accessible toilets for children with disabilities, availability of teaching learning materials for children with disabilities, sufficiency of special educators and so on.

It is important to highlight that the indicators are decided by each group based on their unique priorities. These indicators are not set in advance of the process by the implementing OPDs. This is important to maintain the spirit of DISC as a participatory process. The indicators will differ with each group, between countries and even between localities. The indicators shared in this guide were developed by the groups we worked with and are reflected as is.

## Definition of indicators

Explain to the group the meaning of 'indicator' as a measure of performance of the service, and as an aspect of service that helps them decide if the service is good or satisfactory to them. Do not use the word 'indicator' with the group. Tell them to describe what they would think of if they were to rate the service. On what basis would they rate the service? What would be important to them about the way the service is provided?

**Table 1:** Examples of possible indicators

Service	Serial no	Possible indicators
Anganwadi centres (AWCs)	1	Enrolment of children with disabilities
	2	Ease of accessing toilets in AWCs
Primary schools	1	Availability of teaching aids
	2	Ease of accessing toilets in primary schools
Middle schools	1	Ease of accessing toilets in middle schools
	2	Sufficiency of special educators and teachers

- Based on the orientation, the facilitator should guide the participants to discuss their experiences on various services used by them, one facility at a time.
- Begin by discussing the services made available at the facility, for example primary school. Encourage the participants to discuss positive as well as negative experiences they have had. Make sure that the experiences shared by the participants are their own and not based on hearsay. If needed, use the facilitation guidelines from chapter 2 on preparation and planning.
- Guide the discussions to arrive at indicators that can be used to evaluate the services. Make sure that all aspects of primary school services are covered in the discussions, and indicators are developed.

All discussions will happen at the table where the participants have been seated as groups.

The next task will be to prioritise five to eight indicators from this exhaustive list that are very critical to ensuring good-quality services at the primary schools.

At the end of this exercise all three groups will prepare their own list of five to eight indicators that are critical to children with disabilities getting mandated services from primary schools.



**Table 9:** An example of list of indicators by different groups for primary school services

Primary school services		
<b>Group 1: Children with disabilities</b>		
Number of participants: 5		
Names of the volunteers:		
Serial no	Indicator	Reason for prioritising
1	Availability of ramp	It is mandated as well as important for children with disabilities.
2	Availability of toilets	It is mandated.
3	Accessibility of toilets	It is mandated as well as important for children with disabilities.
4	Equal opportunities for children with disabilities in games and recreation	Some children with disabilities feel left out during play time.
5	Behaviour of teachers towards children with disabilities	Not all teachers treat and teach children with disabilities well.
6	Interest in coming to school	Environment is not conducive to learning for children with disabilities.
7	Availability of drinking water	Clean drinking water is not available
<b>Group 2: Parents of children with disabilities</b>		
Number of participants: 9		
Names of the volunteers:		
Serial no	Indicator	Reason for prioritising
1	Availability of assistive devices for helping the learning process of children with disabilities	It is mandated as well as useful for children with disabilities for learning.
2	Availability of special educators	It is mandated and crucial for children with disabilities.
3	Accessibility of toilets	It is mandated as well as important for children with disabilities.
4	Behaviour of teachers	Teachers do not treat children with disabilities with compassion. They refer to them by their disabilities and not their names.
5	Behaviour of other children towards children with disabilities	Important for conducive environment for children with disabilities.
6	Availability of ramp	It is mandated as well as important for children with disabilities.
7	Availability of transport allowance/ escorts allowance	Allowance is insufficient in some cases. Some parents do not know how to claim it.

Primary school services		
<b>Group 3: Service providers and local administration</b>		
Number of participants: 5		
Names of the volunteers:		
Serial no	Indicator	Reason for prioritising
1	Availability of special educators	It is mandated and it is critical for learning. There is a shortage of trained special educators.
2	Availability of trained teachers	Many teachers are not trained to teach a class of mixed students (i.e. a class with some children with disabilities).
3	Availability of teaching aids for children with disabilities	It is mandated as well as useful for children with disabilities for learning
4	Admission and retention of children with disabilities	Parents are reluctant to admit children with disabilities to schools and teachers find it difficult to retain them in school.

The formats for the indicators list is attached in Annexure 6.



Small group discussion to identify key indicators in Gajnam, Odisha.

## 5.5 Step 4: Focus group discussion with women and girls

From among the participants of groups one and two (children with disabilities and parents of children with disabilities), select a few female participants and adolescent girls and have a separate group discussion to understand the challenges and issues that they face in accessing the services that are being assessed.

This is only a focus group discussion and no separate indicators will be developed by this group. The aim is to get the perspective of women and girls on the issue being discussed, and to capture and record concerns that are directly affecting this target group of women and adolescent girls. It would be important to keep in mind indicators around violence, abuse or bullying that women and girls with disabilities face in school, especially if it comes up in this focus group.

If in the discussion it is learned that some aspect of service or key issue that is very pertinent to women and girls is missed out in the overall indicators generated by the three groups, then the compilation team may use its discretion to include an indicator or two as required, to include these issues.

One of the three moderators (preferably female) and scribes, who had facilitated the group discussion and indicator development exercise earlier, can facilitate the discussions in this group.

## 5.6 Step 5: Compilation of indicators for voting

The list of indicators from all three groups should be collected and shared with the compilation team (refer to chapter 3: preparation and planning). The compilation team should go through all three lists of indicators from the three groups and make a consolidated list of indicators that will be used for the voting exercise. At this time, the team may use its discretion to add indicators to include the concerns raised in the group discussion with women and girls if necessary. All three groups, therefore, will vote on the same indicators, even if they had not included the indicator in their discussions. The following steps are suggested to aid the process of consolidation:

1. List the common indicators from the three lists.
2. Combine and integrate the indicators where possible. For example, if group one has listed 'functionality of toilets' as an indicator, group two has listed 'availability of water in toilets' and group three has listed 'accessibility of drinking water', the two indicators can be grouped into one indicator. Accessibility and functionality of toilet and drinking water can be kept as a separate indicator.
3. If necessary, include additional indicators to include critical issues of women and girls.
4. Restrict the total number of indicators to a maximum of eight in the consolidated list.

**Table 10:** An example of a compiled list of indicators for primary school services

Compiled list of indicators for primary school services	
Number of participants:19	
Serial no	Indicator
1	Physical accessibility of the school
2	Availability of accessible sanitation facilities at school
3	Availability of special educators and trained teachers
4	Behaviour of teachers
5	Behaviour of other children towards children with disabilities
6	Availability of assistive devices for helping the learning process of children with disabilities
7	Availability of teaching aids for children with disabilities
8	Availability of transport allowance/escorts allowance

From table 10, it can be seen how indicators two and three from group one, indicator six from group two and indicator two from group three have been grouped into one indicator of 'physical accessibility of the school' (indicator number one). Similarly, the most repeated indicator in all four groups – sanitation facilities in schools – is included in the list as indicator number two.

Other indicators that were common across groups, such as behaviour of teachers and behaviour of children, have been included. Other important indicators related to special educators, teaching aids and so on, while not common across groups, have been included in the compiled list as they are important to the service that is being assessed which is 'quality of education for children with disabilities in primary schools'. The compilation team must therefore use its discretion, understanding of the issue and input provided by the three groups (as well as input from the separate discussion with women and girls) while arriving at the compiled list of indicators.

### Repeat steps 3, 4 and 5 for other services (if any)

When more than one service is being assessed using the DISC process with the same participants, the assessment can take place in a continuous process, one service after another. While the compilation team is preparing the consolidated list of indicators, the moderator and volunteers should proceed with step three, for the next service earmarked for assessment. Each of the groups should repeat the process of discussions, development of exhaustive list of indicators for services and prioritisation of indicators to arrive at a list of five to eight critical indicators in the same way as was done earlier for the earlier service.

**A template is provided in Annexure 7.**



## 5.7 Outputs and outcomes from this exercise

1. Better understanding of entitlements under RPWD Act 2016 and Right to Education Act 2009, underscored by the CRPD and SDGs, among all participants.
2. Sharing of experiences at the facility level (for example, primary school) to children and people with disabilities.
3. Consolidated list of indicators for voting for each service being assessed.



Small group discussions to consolidate indicators for voting for each service being assessed in Chattisgarh.

## Chapter 6: Voting

With the list of indicators compiled during the group meeting exercises (chapter 5), the next step in DISC is to vote for the indicators. This chapter details the process of voting and the various steps involved in voting.

Though the approach includes the word 'score', scoring is used only up to the point where the individual participant is casting a vote. Individuals score on a scale of 1-5 for each indicator. However, there are no consolidated or average scores computed at any point. It is only the number of votes against each point on the scale that are counted and used for computing results, hence the use of the word 'voting'.

### Materials required






Serial no	Team/materials required	Number per group	Total numbers
1	Coordinator	-	1
2	Moderator	1	3
3	Scribe	1	3
4	Volunteers	As designated during group meeting exercise.	As designated during group meeting exercise.
5	Participants	All OPD members, people with disabilities, children with disabilities and their parents, service providers and local administration who were present during the group meeting exercise.	All OPD members, people with disabilities, children with disabilities and their parents, service providers and local administration who were present during the group meeting exercise.
6	Flex/chart paper listing the indicators	1	3
7	Flex/chart paper for results	-	3
8	Soft board pins/ adhesive tape to hang the charts	8	24
9	Marker pens or stickers	Marker pens: 2 Stickers: 8 per participant in the group	8 pens
10	Audio recording device	1	3
11	Video recording device	-	1

From the previous group meeting exercise, the compilation team will have prepared multiple lists of indicators, one for each service being assessed. In this exercise, performance on these indicators will be assessed by the votes contributed by the participants.

- Voting will be done on a scale of 1-5 (represented by smiley faces) where 1 is very bad service, 2 is bad service, 3 is okay service, 4 is good service and 5 is very good service.
- Votes can be cast by marking a tick or circle with marker pens or by using different coloured stickers. Volunteers can support participants, especially those with visual and intellectual impairments
- One of the two methods (marking or stickering) must be decided ahead of time, with the same method is to be followed by all the three groups. If stickers are to be used, sufficient numbers must be purchased in advance.

Every participant will cast **one** vote only for **each** indicator in the list. Assuming there will be a maximum of eight indicators in one list, every participant will cast a maximum of eight votes.

**Table 11:** Voting scale

Voting scale <sup>3</sup>		
Score	Description of the score	Depiction
1	Very bad	
2	Bad	
3	Okay	
4	Good	
5	Very good	

## 6.1 Preparations

1. Make sure the participants, volunteers, designated moderator and scribe are seated in the same groups as they were during the group meetings. The sign boards should help the participants to re-group into the same spots as earlier.
2. Distribute one copy of the indicators list for each service being assessed to the moderator of each of the three groups.

## 6.2 Steps to be followed by the three groups

1. The moderator of every group will display the chart consisting of indicators for one service on the wall near the table where the respective group members are seated.
2. Make sure it is convenient for all the members of the group to access the displayed chart.
3. Invite one member of the group at a time to the chart, and ask them to vote for all the indicators in the list one by one. If needed, explain the indicators and the ranking system.
4. Encourage the volunteers to assist the participants – especially those with visual impairments – to the chart and back if needed.
5. The moderator and the volunteer should refrain from influencing the participant in casting their vote.
6. The moderator should make sure that every participant in the group casts their vote.






<sup>3</sup>Though the name of the approach includes the word 'score', scoring is used only up to the point where the individual participant is casting a vote. The individual scores on a scale of 1-5 for each indicator. However, there are no consolidated or average scores computed at any point. It is only the number of votes against each point on the scale that are counted and used for computing results.






7. Once all the participants have voted for all the indicators in the list, pass on the list to the compilation team.
8. In case some participants do not wish to vote for any indicator for any reason, such as lack of knowledge or that it doesn't apply to them, add a different coloured dot, tick or sticker at the outer






edge of the chart on the right side for each indicator under the 'don't know' column. This will help to ensure that the number of votes ultimately tallies with the number of participants.

**Repeat steps one to eight for every service that is being assessed, one after another.**

**Table 12:** An example of voting sheet by different stakeholder groups

Primary school services: votes							
Group 1: Children with disabilities							
Number of participants: 5							
Names of volunteers:							
Serial no	Indicator	 Very bad	 Bad	 Okay	 Good	 Very good	Don't know
1	Physical accessibility of the school	✓✓✓	✓	✓			
2	Availability of sanitation facilities at the school	✓✓✓	✓✓				
3	Availability of special educators and trained teachers	✓✓✓		✓✓			✓
4	Behaviour of teachers		✓✓✓✓	✓			
5	Behaviour of other children towards children with disabilities		✓✓✓	✓✓			
6	Availability of assistive devices for helping the learning process of children with disabilities		✓✓✓	✓✓			
7	Availability of teaching aids for children with disabilities			✓✓			✓✓✓
8	Availability of transport allowance			✓✓			✓✓✓

Group 2: Parents of children with disabilities							
Number of participants: 9							
Name of moderator:							
Serial no	Indicator	 Very bad	 Bad	 Okay	 Good	 Very good	Don't know
1	Physical accessibility of the school	✓✓✓✓	✓✓✓✓	✓			
2	Availability of sanitation facilities at school	✓✓✓✓	✓✓✓✓	✓			
3	Availability of special educators and trained teachers	✓✓✓✓	✓✓✓✓	✓			
4	Behaviour of teachers	✓✓✓✓	✓✓✓✓	✓			
5	Behaviour of other children towards children with disabilities	✓✓	✓✓✓✓	✓✓	✓		
6	Availability of assistive devices for helping the learning process of children with disabilities			✓✓✓ ✓✓	✓✓✓✓		
7	Availability of teaching aids for children with disabilities		✓✓✓	✓✓✓✓	✓✓		
8	Availability of transport allowance/ escorts allowance	✓✓✓ ✓✓	✓✓	✓✓			

Group 3: Service providers and local administration							
Number of participants: 5							
Name of moderator:							
Serial no	Indicator	 Very bad	 Bad	 Okay	 Good	 Very good	Don't know
1	Physical accessibility of the school		✓✓✓	✓✓			
2	Availability of sanitation facilities at school			✓✓✓	✓✓		
3	Availability of special educators and trained teachers	✓	✓✓✓✓				
4	Behaviour of teachers				✓	✓✓✓✓	
5	Behaviour of other children towards children with disabilities				✓✓	✓✓✓	
6	Availability of assistive devices for helping the learning process of children with disabilities	✓✓	✓✓✓				
7	Availability of teaching aids for children with disabilities	✓✓	✓✓✓				
8	Availability of transport allowance/ escorts allowance				✓✓✓ ✓✓		

Formats for voting other services are attached in Annexure 8.

### 6.3 Outputs from the exercise

- Voting list:** three voting sheets, one from each group for each service assessed.

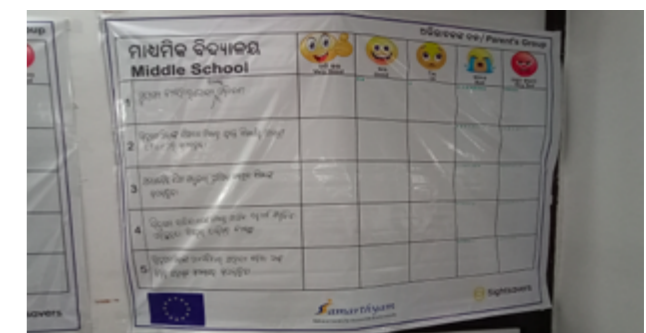


Chart with indicators for each service posted on the wall in preparation for voting in Hazaribagh, Jharkhand.



# Chapter 7: Results

After all the stakeholder groups have successfully voted for the indicators, the next step is to generate the results sheet. The result will feed into the action plan preparation exercise. This chapter gives all necessary details that can help the compilation team prepare the results sheet.

**Duration:** Results compilation can be completed in **one hour**.

## Materials required

Serial no	Team/materials required	Numbers
1	Compilation team members	3-4 members
2	Flex/chart paper	2
3	Laptop	1

The compilation team will be responsible for arriving at the results of the voting exercise, and also interpreting the results for further action. Two tasks are to be conducted by the compilation team at this stage of DISC:






1. Collecting all the voting sheets from all three groups and compiling them to prepare the results sheet. Microsoft Excel can be used to enter the results and Microsoft PowerPoint can be used to share them at the interface meeting.
2. Interpreting the results and separating out the lowest ranked indicators for all the services being assessed. This will be the basis for preparation of the action plan for improving the quality of services for people with disabilities.






## 7.1 Results sheet for each service

1. Collect the voting sheet from the three groups for each service indicators.
2. Add up the votes for each indicator and prepare the compiled results sheet.

Template of results sheet can be found in Annexure 9.

**Table 13:** An example of results sheet for primary school services

Primary school services: results									
Total number of participants: 19									
Number of votes for ratings:									
Serial no	Indicator	Voters category	 Very bad	 Bad	 Okay	 Good	 Very good	Don't know	Total
1	Physical accessibility of the school	Children with disabilities	3	1	1				5
		Parents of children with disabilities	4	4	1				9
		Service providers and local administration		3	2				5
		Total	7	8	4				19
2	Availability of sanitation facilities at school	Children with disabilities	3	2					5
		Parents of children with disabilities	4	4	1				9
		Service providers and local administration			3	2			5
		Total	7	6	4	2			19
3	Availability of special educators and trained teachers	Children with disabilities	2		2			1	5
		Parents of children with disabilities	4	4	1				9
		Service providers and local administration	1	4					5
		Total	7	8	3			1	19



Primary school services: results									
Serial no	Indicator	Voters category	 Very bad	 Bad	 Okay	 Good	 Very good	Don't know	Total
4	Behaviour of teachers	Children with disabilities		4	1				5
		Parents of children with disabilities	4	4	1				9
		Service providers and local administration				1	4		5
		Total	4	8	2	1	4		19
5	Behaviour of other children towards children with disabilities	Children with disabilities		3	2				5
		Parents of children with disabilities	2	4	2	1			9
		Service providers and local administration				2	3		5
		Total	2	7	4	3	3		19
6	Availability of assistive devices for helping the learning process of children with disabilities	Children with disabilities		3	2				5
		Parents of children with disabilities			5	4			9
		Service providers and local administration	2	3					5
		Total	2	6	6	3			19
7	Availability of teaching aids for children with disabilities	Children with disabilities			2			3	5
		Parents of children with disabilities		3	4	2			9
		Service providers and local administration	2	3					5
		Total	2	6	6	2		3	19
8	Availability of transport allowance/ escorts allowance	Children with disabilities			2			3	5
		Parents of children with disabilities	5	2	2				9
		Service providers and local administration				5			5
		Total	5	2	2	5		3	24

## 7.2 Action plan inputs for each service



From the result sheet for each service, list the indicators that are rated as **Low**: that is, rankings 1 and 2 by the largest number of votes (and more than 50 per cent of the total votes) on the rating and list them separately for preparation of the action plan for each service being assessed. In rare cases where none of the indicators have been voted poorly by 50 per cent or more participants, list three to five indicators that have been rated poorly on the whole.

**Table 14:** An example of inputs for preparing action plan for primary school services from the results sheet

Primary school services inputs for action plan				
Total number of participants: 19				
Number of votes for ratings:				
Serial no	Indicator	 Very bad	 Bad	Total out of 19
1	Availability of special educators and trained teachers	7	8	15
2	Physical accessibility of the school	7	8	15
3	Availability of sanitation facilities at the school	7	6	13
4	Behaviour of teachers	4	8	12
5	Behaviour of other children towards children with disabilities	2	7	9

In the example table above, all the indicators that have been rated low (very bad and bad) by 50 per cent or more participants (nine or more out of 19 participants) have been included as inputs for the action plan.

Template for inputs for action plan is given in Annexure 10.

## 7.3 Outputs from this exercise

1. The results sheet with compiled votes for each service is assessed.
2. Inputs for action plan preparation from the respective results sheet.

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Final result sheets used for an interface meeting in Ganjam district, Odisha.

Result sheet for an interface meeting in Chittorgarh district, Rajasthan.

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## Chapter 8: Interface meeting

From the previous exercise, the results sheet will clearly show the aspects of service delivery that need intervention. The next step in DISC is to share the compiled result with all stakeholders and engage in further dialogue with service providers and local administration in the interface meeting. This chapter gives the details on how to conduct the meeting.

**Duration:** Interface meeting requires about **four hours** to complete.

### Materials required

Serial no	Team/materials required	Numbers
1	Participants: OPD members and service provider representatives present in the group meeting exercise	-
2	Senior officials from the district level education department	At least 1
3	Facilitator: moderators with more experience	2
4	Scribes	2
5	Completed voting charts	3
6	Result in Microsoft PowerPoint presentation or flex chart	1
7	Inputs for action plan in Microsoft PowerPoint presentation or flex chart	1
8	Blank flex format for action plan	1
9	Audio recorder	1
10	Video recorder	1

The proceedings of the interface meeting should begin by welcoming all the participants, which include OPD members and service provider representatives. The voting charts must be displayed on the wall before the meeting begins.

This should be followed by a recap of the exercises conducted so far, from input tracking to group meetings.

The next step is to generate indicators to assess the services delivered for people with disabilities, ranking the indicators by casting votes and arriving at results that help to understand what aspects of service delivery is performing well, and what aspects need improvements based on the voting by participants. The results compiled after the voting exercise must be displayed using a PowerPoint presentation.



## 8.1 Presentation of results

The facilitator should share the results for one service at a time using the results sheet.

1. Present the results 'as is'. Do not attempt to influence the presentation with your own experiences or opinions.
2. Explain the aspects that were considered when participants were voting on the indicators.
3. Focus on getting responses from the service providers and local administration. Do not make it a 'finger pointing exercise'. The idea is to make the service providers and local administration familiar with the difficulties faced by people with disabilities and understand how these can be effectively addressed.

## 8.2 Responses and reactions of service providers and local administration

The facilitator should encourage the service provider to respond and react to the results, one indicator at a time. The usual responses of the service providers and local administration will be of the following nature:

- a. Possible reasons for low rating of indicators:** The service providers and local administration will share the possible reasons for the low rating of the indicators. For example it could be that the issue needs action from a higher-level authority, or that another department is responsible for addressing the issue, or there is a lack of funds that is not within their remit, and so on.
- b. Acknowledge the service delivery gap and respond with details on what action they intend to take:** The facilitator must attempt to get the service provider to commit to specific actions, and with as much detail as possible, such as who will do what – and within what timeframe – to address the issue. For example, if access to the school building

is an issue because of a lack of ramp, then a good response would be to ensure the head teacher and the SDMC members commit to repairing/constructing a ramp according to the specifications within a month's time by using the funds available to the SDMC. Here, in this example, we have the responsibility assigned to the head teacher and SDMC members, the timeline is clear at 30 days, and the source of funds required to take action is also clearly specified.

- c. Refusal or denial of low rating:** The service providers and local administration may question the method of rating, or express that the rating does not reflect the reality. They may even ask pertinent questions of participants who were responsible for ranking, or of the organisers on the methodology and comprehensiveness of data collected and so on. In this scenario, the facilitator should share the reasons for giving a low rating based on the group meetings and input tracking exercises. The facilitator should not interrupt the service provider while they are giving their reasons for denying the low rating. Once they have shared their viewpoints, make an effort to ask the service provider what they suggest can be done to further improve their services.

## 8.3 Documentation by the scribe

Scribes must make detailed notes of the responses from the service provider representatives. Taking elaborate notes of responses made by service provider representatives at all levels will be valuable for preparing the action plan.



The compiled result is shared to engage in further dialogue with service providers and local administration in an interface meeting in Chittorgarh district, Rajasthan.

## 8.4 Q&A with the audience

Once all the indicators of all services have been discussed, open the forum for parents and OPD members to ask questions of service providers and local administration. Do not encourage the discussion of specific cases, but stick to the results sheet. Use specific cases as anecdotes only if necessary to drive a point. Do not be antagonistic.

## 8.5 Closing the interface meeting

Once all the participants' concerns are addressed, the facilitator should close the meeting with a vote of thanks in which they thank all participants for the role they played, and for their time and effort.

The facilitator should also share the 'way forward' explaining how the votes, results and the interaction during the interface meeting will be used in preparing an action plan for improving the services.

Clear follow-up measures that will be taken by OPDs, service providers and local administration – and the means by which the participants will be made aware of the progress of work committed to in the action plan – should also be shared in this forum.

This is critical as it will give confidence to the participants that their effort and time spent was worthwhile.

## 8.6 Outputs from this exercise

- Detailed notes on the reactions/responses from service providers and local administration will be recorded on the result sheet for all the services assessed.

# Chapter 9: Action plan

The interface meeting detailed in chapter 8 enables stakeholders to respond and engage in constructive dialogue, and provides pointers towards possible actions to make things better. Based on these inputs, detailed action plans should be prepared, with timelines to ensure suitable actions are taken to address the concerns. This chapter lays down the steps that need to be followed in preparing an effective action plan.

**Duration:** Action plan preparation requires about **four hours per service being assessed.**

### Materials required

Serial no	Team/materials required	Numbers
1	Participants: OPD members and service provider representatives present in the group meeting exercise	-
2	Facilitator: moderators with more experience	2
3	Scribes	2
4	Result charts	1
5	Action plan input sheets (flex if prepared)	1
6	Format of action plan	1
7	Audio recorder	1
8	Video recorder	1



- The action plan inputs charts prepared from the results sheet should be used for the action plan preparation.
- Similar to other exercises, the action plan should be prepared for one service at a time.
- The action plan input sheets and result sheets must be displayed on the wall prior to beginning any discussions on actions.

## 9.1 Points to keep in mind while preparing the action plan

1. Actions should be specific and detailed, not general.
2. Depending on the indicator, short-term (three months), medium-term (three to six months) and long-term (more than six months) actions are to be decided, with an emphasis on short-term and medium-term actions. An estimated budget should also be developed to implement the plan.
3. Responsibility should be fixed with OPDs for follow-up and monitoring.
4. Service provider representatives should also participate in the action plan development process.
5. Clear and realistic deadlines are to be given for ease of follow-up.
6. Best-practice sharing can be encouraged to develop the action plan. This will help everyone arrive at practical solutions that have proven effective in similar contexts. This will also make solutions easy to replicate and scale up, if necessary. Relevant policy recommendations can also be developed.
7. Take the signatures of participants on the action plan charts. Save the same in digital format too, for use in reports.

The template for preparing the action plan is annexed in Annexure 11.

**Table 15:** Example of action plan for primary school services from inputs received from scorecard

Primary school services inputs for action plan				
Total number of participants: 19				
Number of votes for ratings:				
Serial no	Indicator	 Very bad	 Bad	Total out of 19
1	Availability of special educators and trained teachers	7	8	15
2	Physical accessibility of the school	7	8	15
3	Availability of sanitation facilities at school	7	6	13
4	Behaviour of teachers	4	8	12
5	Behaviour of other children towards children with disabilities	2	7	9

**Note:** this is the same as table 14 from chapter 7. It has been presented here again for ease in understanding the preparation of action plan given in table 16.



**Table 16:** An example of action plan for better inclusive educational facilities in primary schools

Primary school services improvement action plan											
S. no	Indicator	Action plan	Who takes action	By when (timeframe)	Resource requirement		Who will follow up	Implementation plan			
					Human	Financial					
1	Availability of special educators (SEs) and trained teachers	a. Recruitment of adequate SEs	Education department	Six months	✓	✓	BEO	Medium-term			
		b. Training SEs to deal with children with different disabilities	Education department	Six months	✓	✓	BEO	Medium-term			
2	Physical accessibility of the school	a. Write a letter for immediate repair work to GP Sarpanch	SDMC chairperson	Within the next two working days			OPD	Short-term			
		b. Accessibility study will be done in five schools as sample basis in coordination with the education department	OPD leaders	By December 2019	✓	✓	OPD	Medium-term			
		c. Block resource persons will be involved in OPDs' meeting and activities	OPD leaders				OPD	Long-term			
3	Availability of sanitation facilities at school	a. Repair the existing toilets to make them functional and accessible to children with disabilities	SDMC	Three months	✓	✓	OPD	Short-term			
		b. Make provision for the storage of water for using in toilets in concrete or plastic tanks	SDMC	Three months	✓	✓	OPD	Short-term			
4	Behaviour of teachers	a. Training programmes for teachers	Education department	Six months	✓	✓	OPD	Medium-term			
		b. SEs can orient teachers on how to deal with children with disabilities	Head teacher	Within one month			OPD	Short-term			
5	Behaviour of other children towards children with disabilities	a. Sharing information with children during class hours to sensitise them	SE teachers Head teacher	Within a month			OPD	Medium-term			
		b. Creating a forum where parents of children with disabilities or children with disabilities can lodge complaints against ill treatment faced	Head teacher and SDMC	Within a month			OPD	Short-term			

## 9.2 Outputs from this exercise

Action plan for improvement of each service that is being assessed with every detail on timelines, responsibilities fixed, follow-up in charge and so on.



OPD members sharing best practices and recommendations to develop the action plan in Chittorgarh district, Rajasthan.



OPD members at the completion of the scorecard process, including action plan, in Hazaribagh, Jharkand



# Chapter 10: Reporting

It is important to document the details of every step in the DISC process. This chapter gives a format that is useful for effective documentation of the DISC exercise.

A report must be prepared for each of the geographical units at which DISC has been carried out (GP/block) for each service. The scribes should exchange notes from their groups and collectively prepare the report.

DISC reports at GP/block level can also be used to prepare a comprehensive report for each service. It is advisable that the report is prepared within **one week** of completing the DISC exercise.

## 10.1 Report outline

### 1. General information

- I. GP (name of the GP to which the village belongs)
- II. Date
- III. Venue
- IV. Facilitation team details
- V. Coordinator
- VI. Moderators
- VII. Scribes
- VIII. Compilation team members
- IX. Volunteers
- X. Names of the villages and GPs represented by the participants (where the participants live) and the facilities that they represent
- XI. Participants attendance lists

### 2. Input tracking

List of people involved in input tracking – participants, service providers, local administration, OPD members.

#### Filled-in format for input tracking

Short narrative on observations from the visits made to the facilities, for example primary schools.

### 3. Group meetings

Filled-in format for group meetings

Short narrative on environment during the meetings, community dynamics, any other observations and discussions.

### 4. Voting and results

Filled-in format

Short narrative on environment during the meetings, general observations.

### 5. Interface meeting

Key discussion points.

Responses from service providers and local administration.

Reactions from the participants and OPD members.

### 6. Action plan

Filled-in format for action plan

Short narrative on the environment in meetings, body language, the attitude of participants and the attitude of service providers and local administration towards the community.

### 7. Add photos and videos with captions



An OPD member shares key points from the group discussion in Hazaribagh, Jharkand.



Women OPD members present key points from the women with disabilities focus group in Hazaribagh, Jharkand.





Pupils outside a resource centre for children with visual impairments in Ranchi.

## Chapter 11: Follow-up

Once the action plan has been prepared (as explained in chapter 9), it is important to follow up to assess the impact of the exercise. This chapter details the steps and methods to be used to effectively follow-up on the implementation of the action plan.

Follow-up activity is a critical exercise that needs to be carried out by the OPD members at the GP/block level. Follow-up activities should be undertaken based on the timeframes agreed upon in the action plan. It is preferable to start follow-up

activities three to six months after the action plan is prepared and agreed upon by all stakeholders. The follow-up exercise is to be carried out until the end of the timeframe agreed upon in the action plan once in every three to six months.

## 11.1 Methods of follow-up

### 11.1.1 Observation

The OPD members should undertake an observation study to see whether actions described in the action plan have been carried out at the facilities.

The template for follow-up observation is given in Annexure 12.

Take only those action items from the action plan that can be observed to record the progress.

Table 17: An example of an observation follow-up exercise of a primary school

Follow-up observation						
Name of primary school:						
Village:				GP:		
Observation done by:				Date of observation:		
Serial no	Action item as per the plan	Who is responsible?	Timeframe agreed	Status of action taken, timeframe adhered to, etc	Remarks/ reasons if not taken	Observation/ suggestion
1	Repair the existing toilets to make them functional and accessible to children with disabilities	SDMC	Three months	Work has started, but is not completed		Though the work has been started, it has not been completed in the agreed timeframe. Children with disabilities are still finding it difficult to use the toilets.
b	Make provision for the storage of water for use in toilets in concrete or plastic tanks	SDMC	Three months	Completed		SDMC has arranged for a plastic tank (Sintex) to store water for use in the toilets.



An OPD leader presents the action plan in Chattisgarh.

### 11.1.2 Informant interview

Interviews with service providers, local administration and people with disabilities who participated in DISC proceedings, and those who did not but use the facility's services, are to be conducted to understand and record the progress on the implementation of an action plan and its effectiveness in improving the services made available in these institutions for people with disabilities.

**Questionnaires for interviews are annexed in Annexures 13a and 13b.**

**For interview of each stakeholder, include only those action items from the action plan that are relevant to their position.**

**Table 18:** An example of a follow-up interview for a primary school: community member

Follow-up interview for a primary school: community member									
Name of the respondent:									
Respondent was a participant in DISC				Yes <b>1</b> No <b>2</b>					
Respondent is a:				Child with disabilities attending primary school <b>1</b> Parent of a child/children with disabilities attending primary school <b>2</b>					
Name of primary school:									
Name of village:					Name of GP:				
Name of the investigator:					Date of interview:				
S. no	Action item as per the plan	Timeframe agreed	Status: Completed: 1 In progress: 2 No action: 3			Has the action been useful? Yes: 1 No: 2		Why?	Suggestions for improvement
1	Repair the existing toilets to make them functional and accessible to children with disabilities	Three months	1	<b>2</b>	3	1	<b>2</b>		Though the work has been started, it has not been completed in the agreed timeframe. Children are still finding it difficult to use the toilets.
2	Make provision for the storage of water for using in the toilets in concrete or plastic tanks	Three months	<b>1</b>	2	3	<b>1</b>	2		A plastic tank (Sintex) is available to store water for using in the toilets.
3	Sharing information with children during class hours to sensitise them	Within a month	1	<b>2</b>	3	<b>1</b>	2		Teachers are talking to all the students in class about trying to help children with disabilities in school activities.
4	Creating a forum where parents of children with disabilities or children with disabilities can lodge complaints against ill treatment faced	Within a month	1	2	<b>3</b>	1	2		



**Table 19:** An example of a follow-up interview for primary school: head teacher

Follow-up interview for primary school: head teacher										
Name of the respondent:										
Respondent was a participant in DISC				Yes	1					
				No	2					
Name of primary school:										
Name of village:					Name of GP:					
Name of the investigator:					Date of interview:					
S. no	Action item as per the plan	Timeframe agreed	Status: Completed: 1 In progress: 2 No action: 3			Has the action been useful? Yes: 1 No: 2		Why?	Suggestions for improvement	
1	Recruitment of adequate SEs	Six months	1	2	3	1	2		OPD members have to follow up with the education department	
2	Training SEs to deal with children with different disabilities	Six months	1	2	3	1	2	Children with disabilities are being treated better		
3	Write a letter for immediate repair works of toilets to GP Sarpanch	Within the next two working days	1	2	3	1	2	Repair work has started		
4	Accessibility study will be done in five schools as sample basis in coordination with education department	By December 2019	1	2	3	1	2	Because of the study, one of the schools' ramp has been constructed using funds from the GP	Completed the study in four schools	
5	Block resource persons will be involved in OPDs' meeting and activities	Ongoing	1	2	3	1	2	Rapport between the OPD members and BRC has improved because of such interactions		

Follow-up interview for primary school: head teacher									
6	Repair the existing toilets to make them functional and accessible to children with disabilities	Three months	1	2	3	1	2	Work is not completed within the timeframe, hence children with disabilities are still unable to use the toilets	SDMC should take initiative to ensure toilet construction is not further delayed. OPD to follow up
7	Make provision for the storage of water for use in the toilets in concrete or plastic tanks	Three months	1	2	3	1	2		
8	Training programmes for teachers	Six months	1	2	3	1	2	Children with disabilities are being treated better	Only soft skill training is being given, which is helping to change the attitude of teachers towards children with disabilities, but no training on teaching children with disabilities is being given. This also needs to be included in the training agenda
9	SEs can orient teachers on how to teach and communicate with children with disabilities	Within a month	1	2	3	1	2		Head teacher and SDMC to the initiative. OPD to follow-up
10	Sharing information with children during class hours to sensitise them	Within a month	1	2	3	1	2		Too early to see the change in behaviour
11	Creating a forum where parents of children with disabilities or children with disabilities can lodge complaints against ill treatment faced	Within a month	1	2	3	1	2		OPD to follow up

**Table 20:** An example of a follow-up interview for primary school:  
SDMC member/GP president

Follow-up interview for primary school: SDMC member/GP president									
Name of the respondent:									
Respondent was a participant in DISC		Yes 1 No 2							
Respondent is a:		GP president 1 SDMC member 2							
Name of primary school:									
Name of village:					Name of GP:				
Name of the investigator:					Date of interview:				
S. no	Action item as per the plan	Timeframe agreed	Status: Completed: 1 In progress: 2 No action: 3			Has the action been useful? Yes: 1 No: 2		Why?	Suggestions for improvement
1	Recruitment of adequate SEs	Six months	1	2	3	1	2		OPD members have to follow up with the education department
2	Training SEs to deal with children with different disabilities	Six months	1	2	3	1	2	Children with disabilities are being treated better	
3	Write a letter for immediate repair works of toilets to GP Sarpanch	Within the next two working days	1	2	3	1	2	Repair work has started	
4	Accessibility study will be done in five schools as sample basis in coordination with education department	By December 2019	1	2	3	1	2	Because of the study, a ramp in one of the schools has been constructed using funds from the GP	Completed the study in four schools
5	Repair the existing toilets to make them functional and accessible to children with disabilities	Three months	1	2	3	1	2	Construction work is incomplete	

Follow-up interview for primary school: SDMC member/GP president									
6	Make provision for storage of water for using in toilets in concrete or plastic tanks	Three months	1	2	3	1	2		
7	Training programmes for teachers	Six months	1	2	3	1	2	Children with disabilities are being treated better	Only soft skill training is being given, which is helping to change the attitude of teachers, but no training on teaching the children is being given. This also needs to be included in the training agenda.
8	SEs can orient teachers on how to teach and communicate with children with disabilities	Within a month	1	2	3	1	2		Head teacher should take initiative. OPD has to follow up
9	Sharing information with children during class hours to sensitise them	Within a month	1	2	3	1	2		Too early to see the change in behaviour
10	Creating a forum where parents of children with disabilities or children with disabilities can lodge complaints against ill treatment faced	Within a month	1	2	3	1	2		OPD to follow up

**Table 21:** An example of a follow-up interview for primary school: Block level officer

Follow-up interview for primary school – Block level officer									
Name of the respondent:									
Respondent was a participant in DISC		Yes <b>1</b> No 2							
Designation of the respondent		BEO							
Name of primary school:									
Name of village:					Name of GP:				
Name of the investigator:					Date of interview:				
S. no	Action item as per the plan	Timeframe agreed	Status: Completed: 1 In progress: 2 No action: 3			Has the action taken been useful? Yes: 1 No: 2		Why?	Suggestions for improvement
1	Recruitment of adequate SEs	Six months	1	2	<b>3</b>	1	2		OPD members have to follow up with the education department
2	Training SEs to deal with children with different disabilities	Six months	<b>1</b>	2	3	<b>1</b>	2	Children with disabilities are being treated better	
3	Block resource persons will be involved in OPD's meeting and activities	Ongoing	1	<b>2</b>	3	<b>1</b>	2	Rapport between the OPD members and BRC has improved because of such interactions	
4	Training programmes for teachers	Six months	1	<b>2</b>	3	<b>1</b>	2	Children with disabilities are being treated better	Only soft skill training is being given which is helping to change the attitude of teachers towards children with disabilities, but no training on teaching these kids is being given. This also needs to be included in the training agenda

## 11.2 Success measurement

Based on the output of the follow-up activities, status reports are to be shared with the service providers and local administration concerned. If there has been a delay or inaction, reasons for this must be noted clearly, before being escalated to higher officials. After several follow-ups, if there is a need felt, modifications to the action plan should also be considered for overall improvement of services made available to people with disabilities.

## 11.3 Outputs from this exercise

1. Status reports
2. Filled-in formats of observation and informant interviews



Schools in Tilda block, Raipur district now have ramps after parents of students with disabilities advocated with the panchayat regarding accessibility issues at the school due to the Disability Inclusive Scorecard.



## Chapter 12: Challenges and learnings

Like any other social accountability tool, DISC also has some limitations. This chapter details some of the key challenges and learnings that emerged during the implementation of the pilot exercise in five states for three services. This can help OPDs and other interested stakeholders when implementing the DISC exercise.

**Time:** Implementing a DISC process, including the implementation and action plan follow-up, is time consuming. It can take up to six months or longer to complete one full cycle. The timeframe can vary significantly depending on the time needed to engage community and provider groups in the process. Constant engagement of the organisation implementing DISC with the communities in more than one way is crucial to ensure their sustained engagement throughout DISC process.

**Cooperation and participation of service providers and local administration:** Holding service providers and local administration accountable may be a new and therefore difficult concept to understand and be accepted by communities, service providers and local administration. Sometimes, the limited cooperation or disinterest by government authorities towards the issues that surface as a result of the community exercises and engagements planned in DISC do occur. Therefore, it is important to involve the service providers and local administration right from inception stage. It is also equally important to identify change makers within the service provider setup and district administration who will be able to understand the objectives and the impact that DISC can bring about, and who would be willing to work together with the implementing agency.

**Expectations from community members:** The next risk lies in the expectations that arise within the communities because of the variety of participatory exercises involved. When some of the expectations of change do not materialise within a reasonable time, there could be anger and resentment within communities directed at those who facilitated the exercises. Therefore, every effort must be made at every stage of DISC process to emphasise that this is a constructive engagement process, and one of a continuous nature where both the participants as well as the providers have a role to play. It is also important to clearly establish the roles of OPD members and all other stakeholders involved in DISC process.

**Facilitation:** The process requires strong facilitation skills from the implementing organisation. The nature of the process may raise conflict or defensiveness among the participants. Well-trained facilitators who have been successful in building rapport with the community members, as well as service providers and local administration, should take a lead in implementing DISC.



OPD members, parents and children with disabilities gather for the start of the DISC process in Chattisgarh.

**Difficulty in participation for some participants:** Participants with more severe disabilities, including children and adults with intellectual impairments, may require support people such as caregivers or parents. Mobility can also be an issue for a majority of the participants. Therefore the choice of venue, transportation arrangements and assistance from volunteers should be planned very carefully to reduce as much inconvenience as possible. It may be helpful to meet the children with intellectual disabilities and their support person beforehand, and explain the process in clear and simple terms.

**Difficulty in mobilising participants:** Since DISC focuses on disability inclusion, identifying the required number of people with disabilities willing to engage in a participatory exercise such as DISC from among the villages in a block may be challenging. Once identified, bringing them all together to a central location could also be challenging. The venue should be selected in such a way that no one will have to travel a long distance to reach it. Necessary transportation arrangements must be made to pick up participants and drop them back to their homes.

# Disability Inclusive Scorecard

## Annexures to the manual

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## Annexure 1: A typical agenda for training OPD members to implement DISC

### Assessment of primary school, middle school and Anganwadi centres

Time	Session /activity	Facilitator	Remarks/ requirements
<b>Day 1</b>		Expert trainer	This is only for OPD members that are new to the concept
10.00-10.30	Welcome and introductions	Local NGO or OPD staff	
10.30-11.00	Orientation on RTE and RPWD	Expert trainer	
11.00-11.30	Group work on provisions of the Acts	Expert trainer	
<b>11.30-11.45</b>	<b>Tea/coffee break</b>		
11.45-12.15	Training on DISC: steps involved	Expert trainer	
12.15-13:00	Training on DISC: steps involved	Expert trainer	
<b>13.00-14.00</b>	<b>Lunch</b>		
14.00-15.00	Group work on preparations and input tracking	Expert trainer	
15.00-16.00	Group work on group meetings	Expert trainer	
<b>16.00-16.15</b>	<b>Tea/coffee break</b>		
16.15-17.00	Group work on interface meeting	Expert trainer	
17.00-17.30	Group work on action plan	Expert trainer	
17.30-18.00	Assignment of roles for DISC	Expert trainer	

<b>Day 2</b>			
<b>7.30 - 8.30</b>	<b>Breakfast</b>		
8.30-10.00	Recap of first day with OPD members	Expert trainer	
10.00-10.30	Welcome and introduction of all participants for DISC	Expert trainer	
10.30-11.30	Group meetings	Selected OPD members	
11.30- 13.00	Voting	Selected OPD members	
<b>13.00-13.30</b>	<b>Lunch</b>		
13.30-14.00	Reconvening of participants and welcome of senior officials to interface meeting	Senior OPD member or NGO staff	
14.00-16.00	Interface meeting	Experienced OPD members	
16.00-17.00	Open house discussions	Experienced OPD members	
17.00-17.30	Closing	NGO staff or OPD member	
<b>Day 3</b>			
<b>7.30-8.30</b>	<b>Breakfast</b>		
8.30-10.30	Collation of charts and information from notes of interface meeting by OPD members	Expert trainer	
10.30-13.00	Preparation of action plan for Anganwadi centres	OPDs with guidance	
<b>13.00-14.00</b>	<b>Lunch</b>		
14.00-15.30	Preparation of action plan for primary school	OPDs with guidance	
15.30-17.00	Preparation of action plan for middle school	OPDs with guidance	



## Annexure 2a: Physical observation format for Anganwadi centres

Name of the Anganwadi centre				
Village name				
GP name				
Block/district name				
Name of the moderator				
Name of the scribe/volunteer				
Serial no	Input indicator	Entitlement/norm	Actual	Remarks/observations
1	Availability of separate building			
2	Condition of the building			
3	Building accessible to people with disabilities (ramps, handrails and so on)			
4	Availability of sufficient number of rooms			
5	Availability of kitchen			
6	Availability of toilet for people with disabilities, and its functionality			
7	Availability of water in toilets			
8	Availability of soap			
9	Availability of dustbins			
10	Availability of drinking water			
11	Cleanliness of the Anganwadi premises and its surroundings			
12	Behaviour of Anganwadi worker and other staff members towards people with disabilities			

## Annexure 2b: Physical observation format for middle schools

Name of the middle school				
Village name				
GP name				
Block/district name				
Name of the moderator				
Name of the scribe/volunteer				
Serial no	Input indicator	Entitlement/norm	Actual	Remarks/observations
1	Availability of separate building			
2	Condition of the building			
3	Building accessible to children with disabilities (ramps, hand rails etc.)			
4	Availability of sufficient number of classrooms			
5	Availability of seating for children with disabilities			
6	Availability of teaching aids for children with disabilities			
7	Availability of special educators			
8	Availability of kitchen			
9	Availability of toilet for children with disabilities and its functionality			
10	Availability of water in toilets			
11	Availability of soap			
12	Availability of dustbins			
13	Availability of drinking water and its accessibility to children with disabilities			
14	Cleanliness of the school premise and its surroundings			
15	Behaviour of students towards children with disabilities			
16	Behaviour of teachers and other staff members towards children with disabilities			

## Annexure 3a: Key informant interview format for Anganwadi centres

### Interview schedule for users of Anganwadi centres

**Instruction:** Talk to an adolescent girl with a disability; or a pregnant/lactating mother with a disability; or the parent of a child who uses the Anganwadi services, and record the responses

Code	Questions	Responses
1	Name of the Anganwadi centre	
2	Village name	
3	GP name	
4	Block/district name	
5	Name of the moderator	
6	Name of the scribe/volunteer	
7	Respondent is a	1 Adolescent girl with a disability 2 Pregnant woman with a disability 3 Lactating mother with a disability 4 Parent of child aged 0-6 years
8	Services available Yes: 1 No: 2	1 2 Pre-schooling 1 2 Immunisation 1 2 VHND programme 1 2 Nutritious food
9	Is there a separate building for the Anganwadi centre?	1 Yes → Go to question 11 2 No
10	Where is the Anganwadi functioning currently?	
11	What is the condition of the building?	1 Good 2 Average 3 Dilapidated
12	Is there a ramp for people with disabilities to access the building?	1 Yes 2 No → Go to question 14
13	Is the ramp functional and as per specifications?	1 Yes 2 No
14	Is there a facility for drinking water in the Anganwadi centre?	1 Yes 2 No → Go to question 16

Code	Questions	Responses
15	What is the source of drinking water?	1 Bore well 2 Public tap 3 Piped supply 4 Well 5 Others
16	Is there a toilet facility at the Anganwadi centre?	1 Yes 2 No → Go to question 20
17	Does the Anganwadi centre have toilets for people with disabilities?	1 Yes 2 No
18	Are the toilets functional?	1 Yes 2 No
19	Is there provision of water for use in the toilet at the Anganwadi centre?	1 Yes 2 No
20	Is there hand washing facility in the Anganwadi centre?	1 Yes 2 No → Go to question 22
21	Is the hand wash accessible to people with disabilities?	1 Yes 2 No
22	Is the Anganwadi centre providing soap for hand washing?	1 Yes 2 No
23	Does the Anganwadi centre provide dustbins in class, kitchen area, toilets and at other appropriate locations for the collection of waste?	1 Yes 2 No
24	Are the Anganwadi centre premises and classroom cleaned every day?	1 Yes 2 No
25	Are you satisfied with the behaviour of Anganwadi staff with people with disabilities?	1 Satisfied 2 Dissatisfied
<b>Any other observations or notes:</b>		



## Interview schedule for service providers and local administration

Instructions: Talk to an Anganwadi worker

Code	Questions	Responses	
1	Name of the Anganwadi centre		
2	Village name		
3	GP name		
4	Block/district name		
5	Name of the moderator		
6	Name of the scribe/volunteer		
7	Contact details of the Anganwadi worker		
8	Services available Yes: 1 No: 2	1	2 Pre-schooling
		1	2 Immunisation
		1	2 VHND programme
		1	2 Nutritious food
9	Is there a separate building for the Anganwadi centre?	1	Yes → Go to question 11
		2	No
10	Where is the Anganwadi functioning currently?		
11	What is the condition of the building?	1	Good
		2	Average
		3	Dilapidated
12	Is there a ramp for people with disabilities to access the building?	1	Yes
		2	No → Go to question 14
13	Is the ramp functional and as per specifications?	1	Yes
		2	No
14	Is there a facility for drinking water in the Anganwadi centre?	1	Yes
		2	No → Go to question 16
15	What is the source of drinking water?	1	Bore well
		2	Public tap
		3	Piped supply
		4	Well
		5	Others
16	Is there a toilet facility in the Anganwadi centre?	1	Yes
		2	No → Go to question 20
17	Are the toilets functional?	1	Yes
		2	No

Code	Questions	Responses	
18	Does the Anganwadi centre have toilets for people with disabilities?	1	Yes
		2	No
19	Is there provision of water for use in the toilet at the Anganwadi centre?	1	Yes
		2	No
20	Is there hand washing facility in the Anganwadi centre?	1	Yes
		2	No → Go to question 22
21	Is the hand wash accessible to people with disabilities?	1	Yes
		2	No
22	Is the Anganwadi centre providing soap for hand washing?	1	Yes
		2	No
23	Does the Anganwadi centre provide dustbins in classrooms, kitchen area, toilets and at other appropriate locations for the collection of waste?	1	Yes
		2	No
24	Are the Anganwadi centre premises and classroom cleaned every day?	1	Yes
		2	No
25	Are there sufficient funds to run the Anganwadi centre?	1	Yes
		2	No
26	Are there any problems that you face in providing Anganwadi services to children with disabilities?	1	Yes
		2	No → Go to question 28
27	Nature of problems		
28	Are there any problems that you face in providing Anganwadi services to women and adolescent girls with disabilities?	1	Yes
		2	No → Go to remarks and suggestions
29	Nature of problems		
<b>Any other observations or notes:</b>			

## Interview schedule for Vigilance Monitoring Committee and Mother Committee members

**Instructions:** Talk to a member of the Vigilance Monitoring Committee and/or Mother Committee members

Code	Questions	Response
1	Name of the Anganwadi centre	
2	Village name	
3	GP name	
4	Block/district name	
5	Name of the moderator	
6	Name of the scribe/volunteer	
7	Name of the respondent	
8	Is there a functional monitoring committee at the Anganwadi centre?	1 Yes
		2 No
9	Is there a functional Mother Committee at the Anganwadi centre?	1 Yes
		2 No
10	Are there regular inspections of the Anganwadi centre by Mother Committee and the Anganwadi Monitoring Committee?	1 Yes
		2 No
11	Do the Monitoring Committee members discuss issues related to people with disabilities in their meeting?	1 Yes
		2 No → Go to question 13
12	What were the last three discussions related to the issues of people with disabilities?	1. 2. 3.
13	Are there any problems that you face in providing Anganwadi services to children with disabilities?	1 Yes
		2 No → Go to question 15
14	Nature of problems	
15	Are there any problems that you face in providing Anganwadi services to women and adolescent girls with disabilities?	1 Yes
		2 No → Go to remarks and suggestions
16	Nature of problems	
<b>Any other remarks or suggestions</b>		

## Interview schedule for GP presidents and block level officials

**Instruction:** Talk to a block level official from the women and child welfare department and/or GP president

Code	Questions	Response
1	Name of the respondent	
2	Designation	
3	Village name	
4	GP name	
5	Block/district name	
6	Name of the moderator	
7	Name of the scribe/volunteer	
8	Is there a separate building for the Anganwadi centre?	1 Yes → Go to question 10
		2 No
9	Where is the Anganwadi functioning currently?	
10	What is the condition of the building?	1 Good
		2 Average
		3 Dilapidated
11	Is there a ramp for people with disabilities to access the building?	1 Yes
		2 No → Go to question 13
12	Is the ramp functional and as per specifications?	1 Yes
		2 No
13	Are there sufficient funds to run the Anganwadi centre?	1 Yes
		2 No
14	Are there any problems that you face in providing Anganwadi services to children with disabilities?	1 Yes
		2 No → Go to question 16
15	Nature of problems	
16	Are there any problems that you face in providing Anganwadi services to women and adolescent girls with disabilities?	1 Yes
		2 No → Go to question 18
17	Nature of problems	
18	Do you regularly monitor the activities of the Anganwadi centre?	1 Yes
		2 No
<b>Any other remarks or suggestions</b>		

## Annexure 3b: Key informant interview format for middle schools

### Interview schedule for users of middle schools

**Instruction:** Talk to the children with disabilities who attend primary/middle school and/or their parents

Code	Questions	Response
1	Name of the school	
2	Village name	
3	GP name	
4	Block/district name	
5	Name of the moderator	
6	Name of the scribe/volunteer	
7	Respondent is a	1 Student attending the school 2 Parent of a child attending the school
8	Is there a separate building for the school?	1 Yes → Go to question 10 2 No
9	Where is the school functioning currently?	
10	What is the condition of the building?	1 Good 2 Average 3 Dilapidated
11	Is there a ramp available for children with disabilities to access the building?	1 Yes 2 No → Go to question 13
12	Is the ramp functional and as per specifications?	1 Yes 2 No
13	Does the school have seating accessible to children with disabilities?	1 Yes 2 No
14	Are there sufficient teaching aids for children with disabilities?	1 Yes 2 No
15	Does the school have special educators to teach children with disabilities?	1 Yes 2 No
16	Is there a facility for drinking water in school?	1 Yes 2 No → Go to question 18

Code	Questions	Response
17	What is the source of drinking water?	1 Bore well 2 Public tap 3 Piped supply 4 Well 5 Others
18	Is there a toilet facility in the school?	1 Yes 2 No → Go to question 22
19	Does the school have toilets for children with disabilities?	1 Yes 2 No
20	Are the toilets functional?	1 Yes 2 No
21	Is there provision of water for use in the toilet at the school?	1 Yes 2 No
22	Is there a hand washing facility in the school?	1 Yes 2 No → Go to question 24
23	Is the hand wash accessible to people with disabilities?	1 Yes 2 No
24	Is the school providing soap for hand washing?	1 Yes 2 No
25	Does the school provide dustbins in class, toilets and at other appropriate locations for collection of waste?	1 Yes 2 No
26	Is the school premises and classroom cleaned every day?	1 Yes 2 No
27	Are you satisfied with the behaviour of school staff towards children with disabilities?	1 Satisfied 2 Dissatisfied
<b>Any other remarks or suggestions</b>		



## Interview schedule for service providers and local administration: middle schools

Instruction: Talk to the head teacher

Code	Questions	Response
1	Name of the school	
2	Village name	
3	GP name	
4	Block/district name	
5	Name of the moderator	
6	Name of the scribe/volunteer	
7	Name of the head teacher	
8	Is there a separate building for school?	1 Yes → Go to question 10
		2 No
9	Where is the school functioning currently?	
10	What is the condition of the building?	1 Good
		2 Average
		3 Dilapidated
11	Is there a ramp for children with disabilities to access the building?	1 Yes
		2 No → Go to question 13
12	Is the ramp functional and as per specifications?	1 Yes
		2 No
13	Does the school have seating accessible to children with disabilities?	1 Yes
		2 No
14	Are there sufficient teaching aids for children with disabilities?	1 Yes
		2 No
15	Does the school have special educators to teach children with disabilities?	1 Yes
		2 No
16	Is there a facility for drinking water in school?	1 Yes
		2 No → Go to question 18
17	What is the source of drinking water?	1 Bore well
		2 Public tap
		3 Piped supply
		4 Well
		5 Others
18	Is there a toilet facility in the school?	1 Yes
		2 No → Go to question 22

Code	Questions	Response
19	Does the school have toilets for children with disabilities?	1 Yes
		2 No
20	Are the toilets functional?	1 Yes
		2 No
21	Is there provision of water for use in the toilet at the school?	1 Yes
		2 No
22	Is there a hand washing facility in the school?	1 Yes
		2 No → Go to question 24
23	Is the hand wash accessible to people with disabilities?	1 Yes
		2 No
24	Is the school providing soap for hand washing?	1 Yes
		2 No
25	Does the school provide dustbins in class, toilets and at other appropriate locations for collection of waste?	1 Yes
		2 No
26	Is the school premises and classroom cleaned every day?	1 Yes
		2 No
27	Are there sufficient funds to run the school?	1 Yes
		2 No
28	Are there any problems that you face in providing education to children with disabilities in your school?	1 Yes
		2 No → Go to remarks and suggestions
29	Nature of problems	
Any other remarks or suggestions		

## Interview schedule for School Development and Monitoring Committee (SDMC) members: middle school

Instructions: Talk to a member of the SDMC

Code	Questions	Response
1	Name of the respondent	
2	Name of the school	
3	Village name	
4	GP name	
5	Block/district name	
6	Name of the moderator	
7	Name of the scribe/volunteer	
8	Is there a functional SDMC?	
9	Are there regular inspections of schools by SDMC members?	
10	Is there a ramp for children with disabilities to access the school building?	1 Yes 2 No → Go to question 12
11	Is the ramp functional and as per specifications?	1 Yes 2 No
12	Do the SDMC members discuss issues related to children with disabilities in their meeting?	1 Yes 2 No → Go to question 14
13	What were the last three discussions related to the issues of children with disabilities?	1. 2. 3.
14	Are there any problems that you face in providing education to children with disabilities in schools?	1 Yes 2 No → Go to remarks and suggestions
15	Nature of problems	
16	What are the facilities provided for children with disabilities as an effort from SDMC or actions taken by the SDMC to resolve issues concerning children with disabilities?	
<b>Any other remarks or suggestions</b>		

## Interview schedule for block resource coordinators (BRC)

Code	Questions	Response
1	Name of the respondent	
2	Designation	
3	Village name	
4	GP name	
5	Block/district name	
6	Name of the moderator	
7	Name of the scribe/volunteer	
8	Are there separate buildings for schools in your block?	1 Yes → Go to question 10 2 No
9	Where are the schools functioning currently?	
10	What is the condition of the building?	1 Good 2 Average 3 Dilapidated
11	Is there a ramp for children with disabilities to access the school building?	1 Yes 2 No → Go to question 13
12	Is the ramp functional and as per specifications?	1 Yes 2 No
13	Are there sufficient funds to run the schools?	1 Yes 2 No
14	Are there any problems that you face in providing education to children with disabilities in these schools?	1 Yes 2 No → Go to question 16
15	Nature of problems	
16	Do you regularly monitor the activities of the schools?	1 Yes 2 No
<b>Any other remarks or suggestions</b>		

## Annexure 4a: Format for verification of records at Anganwadi centres

Instruction: Talk to an Anganwadi worker

Code	Questions	Response				
1	Name of the Anganwadi centre					
2	Village name					
3	GP name					
4	Block/district name					
5	Name of the moderator					
6	Name of the scribe/volunteer					
7	Number of people with disabilities using the AWC services	Children with disabilities				
		Adolescent girls with disabilities				
		Pregnant women with disabilities				
		Lactating mothers with disabilities				
8	Details of funds specifically earmarked for providing facilities and services to people with disabilities					
Serial no	Source of fund	Amount allocated	Amount received	Amount expended for (describe the items/ activities for which the funds were used)	Utilisation report submitted to (specify the person who prepares the report, who verifies the report and who submits the report and the frequency of submission)	Sufficiency of funds (yes/no)

## Annexure 4b: Format for verification of records at middle schools

Instruction: Talk to head teacher

Code	Questions	Response				
1	Name of the school					
2	Type of the head teacher					
3	Village name					
4	GP name					
5	Block/district name					
6	Name of the moderator					
7	Name of the scribe/volunteer					
8	Total children attending the school	Boys				
		Girls				
		Scheduled Castes				
		Scheduled Tribes				
		Other Backward Castes				
		General				
		Physical Impairments				
9	Assets for children with disabilities details	Asset details	Numbers			
		Seating				
		Ramp				
		Teaching aids				
10	Details of funds specifically earmarked for providing facilities and services to children with disabilities					
Serial no	Source of fund	Amount allocated	Amount received	Amount expended for (describe the items/ activities for which the funds were used)	Utilisation report submitted to (specify the person who prepares the report, who verifies the report and who submits the report and the frequency of submission)	Sufficiency of funds (yes/no)



## Annexure 5a: Excerpts on education from Rights of Persons with Disabilities Act 2016

### Chapter III: Education

**Section 16:** Duty of educational institutions

**Section 17:** Specific measures to promote and facilitate inclusive education

**Section 18:** Adult education

**The appropriate government and the local authorities shall endeavour that all educational institutions funded or recognised by them provide inclusive education to the children with disabilities and towards that end shall:**

- i. Admit them without discrimination and provide education and opportunities for sports and recreation activities equally with others;
- ii. Make building, campus and various facilities accessible;
- iii. Provide reasonable accommodation according to the individual's requirements;
- iv. Provide necessary support – individualised or otherwise – in environments that maximise academic and social development consistent with the goal of full inclusion;
- v. Ensure that the education to persons who are blind or deaf or both is imparted in the most appropriate languages and modes and means of communication;
- vi. Detect specific learning disabilities in children at the earliest opportunity and take suitable pedagogical and other measures to overcome them;

vii. Monitor participation, progress in terms of attainment levels and completion of education in respect of every student with disability;

viii. Provide transportation facilities to the children with disabilities and also the attendant of the children with disabilities having high support needs.

**The appropriate government and the local authorities shall take the following measures for the purpose of section 16, namely:**

- a) To conduct survey of school-going children every five years for identifying children with disabilities, ascertaining their special needs and the extent to which these are being met;
- b) Provided that the first survey shall be conducted within a period of two years from the date of commencement of this Act;
- c) To establish adequate number of teacher training institutions;
- d) To train and employ teachers, including teachers with disability who are qualified in sign language and Braille and also teachers who are trained in teaching children with intellectual disability;
- e) To train professionals and staff to support inclusive education at all levels of school education;
- f) To establish adequate number of resource centres to support educational institutions at all levels of school education;
- g) To promote the use of appropriate augmentative and alternative modes including means and formats of communication, Braille and sign language to supplement the use of

one's own speech to fulfil the daily communication needs of persons with speech, communication or language disabilities and enables them to participate and contribute to their community and society;

- h) To provide books, other learning materials and appropriate assistive devices to students with benchmark disabilities free of cost up to the age of eighteen years;
- i) To provide scholarships in appropriate cases to students with benchmark disability;
- j) To make suitable modifications in the curriculum and examination system to meet the needs of students with disabilities such as extra time for completion of examination paper, facility of scribe or amanuensis, exemption from second and third language courses;
- k) To promote research to improve learning; and
- l) Any other measures, as may be required.

### Chapter VI: Special provisions for persons with benchmark disabilities

**31.** (1) Notwithstanding anything contained in the Rights of Children to Free and Compulsory Education Act 2009, every child with benchmark disability between the age of six to eighteen years shall have the right to free education in a neighbourhood school, or in a special school, of his choice.

(2) The appropriate government and local authorities shall ensure that every child with benchmark disability has access to free education in an appropriate environment until he attains the age of eighteen years.

**32.** (1) All government institutions of higher education and other higher education institutions receiving aid from the government shall reserve not less than five per cent. Seats for persons with benchmark disabilities.

(2) The persons with benchmark disabilities shall be given an upper age relaxation of five years for admission in institutions of higher education.

## Annexure 5b: Excerpts from Right to Education Act 2009

The Right of Children to Free and Compulsory Education Act is an Act of the Parliament of India enacted on 4 August 2009, which describes the modalities of the importance of free and compulsory education for children between 6 and 14 in India under Article 21a of the Indian Constitution. India became one of 135 countries to make education a fundamental right of every child when the Act came into force on 1 April 2010.

The Act makes education a fundamental right of every child between the ages of 6 and 14 and specifies minimum norms in elementary schools.

## Annexure 5c: Entitlement matrix for education services in Chhattisgarh

Scheme provision	Entitlement	Source that specifies entitlement
The Integrated Scheme on School Education aims to look at the education of all children, including children with disabilities, in a continuum from pre nursery to class XII. The scheme will cover all children with disabilities with one or more disabilities as mentioned in the schedule of disabilities of the Rights of Persons with Disabilities (RPWD) Act 2016 studying in government, government-aided and local body schools. Girls with disabilities will receive special focus, and efforts would be made under the scheme to help them gain access to schools, as also to provide motivation and guidance for developing their potential.		Samgra Shiksha Abhiyan
<p><b>Barrier-free access: ramp with railing</b></p> <p>a) The school premises including all the rooms to have barrier-free access to children with disabilities.</p> <p>b) Relevant norms as per BIS codes and 'Harmonised Guidelines and Space Standards for Barrier Free Built Environment For Persons with Disability and Elderly Persons' February 2016 issued by the Ministry of Urban Development, government of India.</p> <p><b>Separate toilets for children with disabilities</b></p> <p>a) Every school will ascertain the number of children with disabilities gender-wise and accordingly provide separate toilet facilities for them.</p> <p>b) A toilet for girls with disabilities should have a provision for an environmentally safe incinerator.</p> <p>c) Existing toilet can be converted to an accessible toilet for use by children with disabilities.</p>		Samgra Shiksha Abhiyan
While the RTE Act mandates the inclusion of children with disabilities, some children with disabilities are unable to attend school despite specific interventions designed for their education. The amendment of the RTE Act (in August 2012) has included children with disabilities in the definition of disadvantaged groups. It includes children with severe/multiple disabilities with the right to opt for Home Based Education (HBE), thus creating an enabling environment for the children.		

Scheme provision	Entitlement	Source that specifies entitlement
<p><b>Social Access to children with disabilities</b></p> <p>Ensuring social access to children with disabilities is a greater challenge when compared to providing physical access, as it requires an in-depth understanding of the various educational needs of children with disabilities.</p> <p>A very important dimension of social access is discrimination. Children with disabilities are subjected to many forms of discrimination. Teachers and peers have a very important role to play in this context. Social access could include the following: i. Parental training ii. Peer sensitisation iii. Awareness building of different stakeholders across all levels iv. Special emphasis will be given to the education of girls with disabilities.</p>	<p><b>Disability scholarship scheme:</b></p> <p>150 rupees, 1st-5th class.</p> <p>170 rupees, 6th-8th class.</p> <p>170 rupees, 6th-8th class.</p> <p>190 rupees, 9th-12th class.</p> <p><b>Readers allowance:</b></p> <p>50 to 100 rupees (based on class)</p>	Disability Scholarship Schemes
<p><b>Curricular access</b></p> <p>The curriculum must be inclusive as envisioned in National Curriculum Framework 2005. It should ensure that the same curriculum be followed for children with and without disabilities, but with adaptations/modifications if required in learning content, teaching learning processes, teaching learning materials/aids and in evaluation etc. Provision will be made to provide textbooks and curriculum in accessible formats to children with disabilities. The exam reforms are to be made by central and state boards for children with disabilities reference at Annexure</p> <p>IV. The modifications are to be disability specific (for example: oral exam for children with specific learning disability, extra time for children with visual impairment, low vision and cerebral palsy etc). A regular audit of existing textbooks from a gender and children with disability lens will be a priority for an apt curriculum.</p>		

Scheme provision	Entitlement	Source that specifies entitlement
<p><b>Curricular access</b> The curriculum must be inclusive as envisioned in NCF-2005. It should ensure that the same curriculum be followed for children with and without disabilities, but with adaptations/modifications if required in learning content, teaching learning processes, teaching learning materials/aids and in evaluation etc. Provision will be made to provide textbooks and curriculum in accessible formats to children with disabilities. The exam reforms to be made by central and state boards for children with disabilities reference at Annexure IV. The modifications to be disability specific (for example, oral exam for children with specific learning disabilities, extra time for children with visual impairment, low vision and cerebral palsy, and so on). A regular audit of existing textbooks from a gender and children with disability lens will be a priority for an apt curriculum</p>		Samgra Shiksha Abhiyaan
<p><b>Scheme provides children's access to elementary schools through</b> Transport and Escort facility to children in Classes I-VIII and for children with disabilities. Children in remote habitations with sparse populations or in urban areas where availability of land is a problem or children belonging to extremely deprived groups or children with disabilities may not find access to schools. Such children may be provided support for transportation or escort facilities.</p>	Transportation allowance of 300 rupees per month to children with disabilities.	Samgra Shiksha Abhiyaan
<p><b>Individualised Educational Plan (IEP)</b> IEP will be undertaken in context of the RPWD Act, as 'individualised support'. Its implementation will be monitored from time to time. Individualised support should review the effectiveness of various strategies and support services used by children with disabilities periodically, after developing indicators.</p>		

Scheme provision	Entitlement	Source that specifies entitlement
<p><b>Education of teachers and other stakeholders</b> An intensive teacher education programme will be undertaken to sensitise and build capacity of the regular teachers and resource teachers on meeting the learning needs of all teachers to provide quality education to children with disabilities and improve their learning outcomes. This teacher education programme will be recurrent at block/cluster levels and integrated with the ongoing in-service teacher education/training schedules in District Institute for Education and Training (DIET) and other institutions. Teacher education modules at State Council of Educational Research and Training (SCERT) DIET and Block Resource Centre (BRC) level should include suitable components on the education of children with disabilities. Training of educational administrators including head teachers, all other staff and relevant personnel of school education should be regularly organised. Special focus should be given on the mechanisms for the safety and security of children with disabilities.</p>		
<p><b>Resource support</b> For providing resource support to children with disabilities, the existing human resource appointed under Sarva Shiksha Abhiyan (SSA) and Rashtriya Madhyamik Shiksha Abhiyan (RMSA) flagship scheme of the government of India, to enhance access to secondary education will be rationalised and the remaining vacancies to be filled through fresh appointment as per the norms provided at Annexure III. All educators should be registered with the Rehabilitation Council of India (RCI). These educators should mandatorily be available for all children with disabilities including the children with high support needs, too. The educators may be posted at the block or cluster level or as per the requirement and can operate in an itinerant mode, covering a group of schools where children with disabilities are enrolled.</p>		Samgra Shiksha Abhiyaan
<p>General schoolteachers will be sensitised and trained to teach and involve children with disabilities in the general classroom. For existing special educators, capacity building programmes will be undertaken.</p>		Samgra Shiksha Abhiyaan



Scheme provision	Entitlement	Source that specifies entitlement
	15,000 per development block for the children of disabilities equipment for disabilities in resource centres.	Samgra Shiksha Abhiyaan
The curriculum must be inclusive as envisioned in National Curriculum Framework 2005. It should ensure that the same curriculum be followed for children with and without disabilities, but with adaptations/modifications if required in learning content, teaching learning processes, teaching learning materials/aids and in evaluation, and so on. Provision will be made to provide textbooks and curriculum in accessible formats to children with disabilities.	The e-books will be provided to children with disabilities and children studying in class 5 and 7, which will facilitate them in the study.	Samgra Shiksha Abhiyaan
	Provision of providing a scholarship of 200 rupees per month to female students with disabilities.	Samgra Shiksha Abhiyaan
The exam reforms to be made by central and state boards for children with disabilities reference at Annexure IV. The modifications to be disability specific (for example, oral exam for children with specific learning disability, extra time for children with visual impairment, low vision and cerebral palsy, and so on). A regular audit of existing textbooks from a gender and children with disabilities lens will be a priority for an apt curriculum.		Samgra Shiksha Abhiyaan

Scheme provision	Entitlement	Source that specifies entitlement
The integrated scheme will encourage research and development activities in all areas of education of children with disabilities including action research, researches to improve the learning of children with disabilities, especially focusing on children with high support needs (thalassemia, haemophilia sickle cell disease, chronic neurological conditions, and so on), eventually leading to concrete learning outcomes. For this, convergence with different ministries like Ministry of Health and Family Welfare, Ministry of Women and Child Development, Ministry of Social Justice and Empowerment, Ministry of Sports and Youth Affairs, private organisations with Corporate Social Responsibility (CSR) funds and so on.		Samgra Shiksha Abhiyaan
<b>Building synergy with special schools</b> In case of a non-availability of resources required for the education of children with disabilities and the education of teachers teaching children with disabilities, assistance from special schools may be taken. These special schools can work as resource centres for providing resources like the development of curricular materials and TLMs, providing support services to children with disabilities and the education of teachers, and so on.. In some cases, special schools can also impart special training to children with disabilities for facilitating age-appropriate placement in the classroom for a specified period of time. NGOs working on the education of children with chronic health impairments such as leukaemia, heart diseases and cancer may also provide resource support for pertinent care and health-related needs, and the capacity building of teachers.		Samgra Shiksha Abhiyaan






### Annexure 6: Template for indicators' chart for each group

Services		
Group :		
Number of participants:		
Names of volunteers:		
Serial no	Indicator	Reason for prioritising
1		
2		
3		
4		
5		
6		
7		
8		






### Annexure 7: Template for compiled list of indicators

Compiled list of indicators for Services	
Number of participants:	
Serial no	Indicators
1	
2	
3	
4	
5	
6	
7	
8	



### Annexure 8: Template for voting of services for each group

Services: Votes							
Group :							
Number of participants:							
Name of moderator:							
Serial no	Indicator	 Very bad	 Bad	 Okay	 Good	 Very good	Don't know
1							
2							
3							
4							
5							
6							
7							
8							

## Annexure 9: Results sheet template

Services - Results								
Number of participants :								
Number of votes for ratings:								
Serial no	Indicator	Voters category	 Very bad	 Bad	 Okay	 Good	 Very good	Don't know
1		Children with disabilities						
		Parents of children with disabilities						
		Service providers and local administration						
		<b>Total</b>						
2		Children with disabilities						
		Parents of children with disabilities						
		Service providers and local administration						
		<b>Total</b>						
3		Children with disability						
		Parents of children with disabilities						
		Service providers and local administration						
		<b>Total</b>						
4		Children with disabilities						
		Parents of children with disabilities						
		Service providers						
		<b>Total</b>						

## Annexure 10: Template for inputs for action plan

Services inputs for action plan				
Total number of participants:				
Number of votes for ratings:				
Serial no	Indicator	 Very bad	 Bad	Total out of (Insert the total number of participants)
1				
2				
3				
4				
5				

## Annexure 11: Template for action plan

Services improvement action plan								
Serial no	Indicator	Action plan	Who takes action	By when (time-frame)	Resource requirement		Who will follow up	Implementation plan (Long/medium/short term)
					Human ✓	Financial ✓		
1								
2								
3								
4								
5								



## Annexure 12: Template for follow-up observation

Follow-up observation						
Name of the facility:						
Village:				GP:		
Observation done by:				Date of observation:		
Serial no	Action item as per the plan	Who is responsible	Timeframe agreed	Status of action taken or not, time frame adhered to or not, and so on	Remarks/ reasons if not taken	Observation/ suggestion

## Annexure 13a: Template for follow-up interviews for Anganwadi services

Follow-up interview for Anganwadi centres: community member								
Name of the respondent:								
Respondent was a participant in DISC		Yes 1	No 2					
Respondent is a		Adolescent girl with disabilities	1					
		Pregnant woman with disabilities	2					
		Lactating mother with disabilities	3					
		Parent of child between 0-six years age	4					
Anganwadi centre name:								
Village:				Name of GP:				
Name of the investigator:				Date of interview:				
Serial no	Action item as per the plan	Timeframe agreed	Status: Completed: 1 In progress: 2 No action: 3			Has the action taken been useful? Yes: 1 No: 2	Why?	Suggestions for improvement
			1	2	3	1	2	
			1	2	3	1	2	
			1	2	3	1	2	
			1	2	3	1	2	
			1	2	3	1	2	

Follow-up interview for Anganwadi centres: Anganwadi worker									
Name of the respondent:									
Respondent was a participant in DISC				Yes 1			No 2		
Anganwadi centre name:									
Village:					Name of GP:				
Name of the investigator:					Date of interview:				
Serial no	Action item as per the plan	Timeframe agreed	Status: Completed: 1 In progress: 2 No action: 3			Has the action taken been useful? Yes: 1 No: 2		Why?	Suggestions for improvement
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		

Follow-up interview for Anganwadi centres: vigilance committee member/GP president									
Name of the respondent:									
Respondent was a participant in DISC				Yes 1			No 2		
Respondent is a				GP President			1		
				SDMC member			2		
Anganwadi centre name:									
Village:					Name of GP:				
Name of the investigator:					Date of interview:				
Serial no	Action item as per the plan	Timeframe agreed	Status: Completed: 1 In progress: 2 No action: 3			Has the action taken been useful? Yes: 1 No: 2		Why?	Suggestions for improvement
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		

Follow-up interview for Anganwadi centres: Block level officer									
Name of the respondent:									
Respondent was a participant in DISC				Yes 1			No 2		
Designation of the respondent									
Anganwadi centre name:									
Village:					Name of GP:				
Name of the investigator:					Date of interview:				
Serial no	Action item as per the plan	Timeframe agreed	Status: Completed: 1 In progress: 2 No action: 3			Has the action taken been useful? Yes: 1 No: 2		Why?	Suggestions for improvement
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		

## Annexure 13b: Template for follow-up interviews for middle school services

Follow-up interview for middle school: Head teacher									
Name of the respondent:									
Respondent was a participant in DISC				Yes 1			No 2		
Name of the middle school:									
Village:					Name of GP:				
Name of the investigator:					Date of interview:				
Serial no	Action item as per the plan	Timeframe agreed	Status: Completed: 1 In progress: 2 No action: 3			Has the action taken been useful? Yes: 1 No: 2		Why?	Suggestions for improvement
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		



Follow-up interview for middle school: SDMC member/GP president									
Name of the respondent:									
Respondent was a participant in DISC			Yes 1			No 2			
Respondent is a			GP President			1			
			SDMC member			2			
Name of the middle school:									
Village:					Name of GP:				
Name of the investigator:					Date of interview:				
Serial no	Action item as per the plan	Timeframe agreed	Status: Completed: 1 In progress: 2 No action: 3			Has the action taken been useful? Yes: 1 No: 2		Why?	Suggestions for improvement
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		

Follow-up interview for Anganwadi centres: Block level officer									
Name of the respondent:									
Respondent was a participant in DISC			Yes 1			No 2			
Designation of the respondent									
Name of the middle school:									
Village:					Name of GP:				
Name of the investigator:					Date of interview:				
Serial no	Action item as per the plan	Timeframe agreed	Status: Completed: 1 In progress: 2 No action: 3			Has the action taken been useful? Yes: 1 No: 2		Why?	Suggestions for improvement
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		
			1	2	3	1	2		

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