

**Proceedings of the Seminar for Preparation of
Action Plan under MoU Signed between RCI and
Texas Technical University, USA held on 9-10
March, 2011 at Action of Autism, New Delhi**



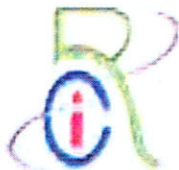
भारतीय पुनर्वास परिषद्

REHABILITATION COUNCIL OF INDIA

(A Statutory Body Under the Ministry of Social Justice & Empowerment)

B-22, Qutub Institutional Area, New Delhi-110016

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Background

The Rehabilitation Council of India is a statutory body under the Ministry of Social Justice and Empowerment. The Council standardizes and regulates the training programmes in the field of rehabilitation and special education. The Council has recognised more than 350 institutions for conducting its various approved programmes. In addition, 10 Open Universities in the Country have been associated for conducting programmes through distance mode. The quality of the training programme is the main focus of the Council, for which it organises various orientation programmes, workshops and national level seminars and conferences. The Council also provides platform to all the rehabilitation professionals and personnel to participate and interact with each other and develop effective strategies for quality training through governmental and non governmental organisations.

The Council has signed an MOU with Texas Tech University (TTU), USA to promote expertise through exchange of experts for upgrading our training facilities and developing need based curriculum in special education. Considering the need, the Rehabilitation Council of India planned a Seminar for sharing insights about recent trends in India and discusses how awareness building



may be expanded in different disability areas; RCI brought together a small group of key individuals closely involved in different disability related activities in India.

The group included stakeholders from different areas, such as medical professionals, special needs professionals, educationists, researchers / scientists, representatives from government agencies, and key figures in the disability sector.

RCI offered Action for Autism (AFA) to join hands in organizing this Seminar for realizing the objectives of the MoU and accordingly AFA with its positive gesture became the organising partner for this national level activity. The National Seminar scheduled during 09th-10th March 2011 started with inaugural address by Maj. Gen. (Retd.) Ian Cardozo, AVSM, SM, Chairperson, Rehabilitation Council of India.

1st Day, 09th March, 2011

INAUGURAL SESSION

The National Seminar for Preparation of Action Plan under MoU signed between RCI and Texas Technical University, USA, “for faculty exchange, research programs, promotion of Special Education, etc”, started with the inaugural session. Dr. Nidhi Singhal, Director – Research & Training at Action for Autism welcomed the dignitaries, guests and delegates in the two-day national Seminar and highlighted the themes.



Maj. Gen (Retd.) Ian Cardozo, AVSM, SM, Chairperson, RCI, in his opening remarks mentioned that Government has taken good steps towards inclusive education and services based on equality. He mentioned that there is shortage of 1.82 lacs Professionals/Personnel in the country. He also suggested that there should be some change in the

orientation in **the** way we think, particularly attitudes towards Persons with Disabilities. He further mentioned that there is a need of an exchange programme in the field of Special Education among foreign Universities or other agencies so that the reciprocity could be facilitated.

Dr. J.P. Singh, Member Secretary, RCI, stated the objectives of MoU signed with Texas Technical University, USA and appreciated the efforts made by Dr. Nora Griffin-Shirley, Director, Texas Tech University, Virginia Murray Sowell Centre for Research and Education in Sensory Disabilities, and Dr. Devender Banda, Assistant Professor, TTU, Special



Education Program, for moving towards this step for promotion of Special Education programmes. He further stated that main goal of the MoU is to promote Special Education programmes with help of faculty exchange, research experiences, short term training programmes between TTU and RCI. He requested the members to guide the Council for successful implementation of MoU for promotion of Special Education programmes. He requested both faculty members of TTU, USA to make a brief presentation.

SCIENTIFIC SESSION- 1

Chairperson : Maj. Gen (Retd.) Ian Cardozo

Speakers : 1. Dr. Nora Griffin-Shirley
2. Dr. Devender Banda

Dr. Nora Griffin-Shirley in her presentation highlighted the 'best practice & evidence-based practice in education and rehabilitation students with visual impairments', the need of evidence based practices, and challenges in the field of Orientation & Mobility field.

She concluded the following points:

1. Derived from evidence-based medicine from Great Britain which focused on empirically based findings from random assignment of participants to treatment groups.

2. ASHA's Definition of Evidence-based (EB) Research

The term *evidence-based practice* refers to an approach in which current, high-quality research evidence is integrated with practitioner expertise and client preferences and values into the process of making clinical decisions.

3. Reasons Why Evidence Based Practice is Important

- Accountability
- Professional responsibility
- Ethics
- Challenges Orientation & Mobility field faces lack of randomized controlled studies
- Lack of a standardized O&M assessment tool or standardized rehabilitation techniques

- No “systematic review of evidence for the effectiveness of the various interventions used by O&M training specialists”
- Lack of agreement among O&M researchers & practitioners as to what are reliable and valid O&M performance measures

4. What do professionals need to do?

- O&M specialists (professionals) need to recognize the gap between research and practice.
- O&M specialists (professionals) have a responsibility to build our knowledge base by reading about research, discussing design and methodology, and then becoming involved in it.
- Question how research can be used in the workplace.
- Stressed the importance of conducting a follow-up with students to assess the efficacy of O&M services.

5. Plan Concerning EB Research for the Education of Students with Visual Impairment & ASD:

- Define what we mean by EB research with a summit & Delphi process
- Decide what the standard measures of VIASD assessments are
- Decide what areas need to be researched
- Develop a mechanism on a website to share this information & to encourage collaboration among members & other professionals to engage in EB research
- Provide professional development to members & other professionals concerning EBPs
- Use podcasts to highlight EB researchers identifying the practical implications of their work concerning teaching students with VIASD
- Strive to look at a model where other health-care professionals can provide service delivery to these students

6. Potential Areas of Research

- Standardized assessment tool
- Amount of inputs to achieve maximum independence for students with VIASD and where there are differential outcomes these co morbidities, and the educator’s level of expertise

7. Potential Research Questions

- How much instruction is required before treatment effects are seen?
- How does the type and degree of vision loss and ASD affect the number of units of service that are required?
- Of the various philosophies of care, which one is the most effective?
- What are the characteristics of subjects who benefit from different philosophies of care?
- What are the measures of performance that are needed to assess the diverse needs of students with VIASD?



Dr. Devender Banda in his presentation highlighted the “Evidence-Based Practices for Persons with Autism Spectrum Disorders (ASD)”.

He included the following points:

1. Autism – Core Characteristics

- Problems with social interactions – difficulty socializing, lack of joint attention, difficulty forming and maintaining friendships, etc.
- Problems in communication (verbal and nonverbal).
- Engagement of repetitive activities or odd behaviors which may include resistance to changes in daily routines, unusual responses to sensory experiences, self-injury, etc.

2. What is an Evidence-Based Practice?

- Derived from medical field. AKA “Research-Based.”
- Meta-analyses (quantitative synthesis) of interventions.
- Randomized control trials (RCT) provide the best evidence which is very difficult to do. SSD provide acceptable experimental control (Horner et al., 2005).
- Strategy or intervention that is consistently effective across-
- several individuals or types
- several geographical locations
- range of problems

- Based on overwhelming data to support the strategy.
- Studies (more is better) replicated thoroughly by several researchers and published in peer-reviewed journals.
- Provided by knowledgeable and trained professionals/teachers.

3. **Why we need EBP?**

- IDEA (2004) and NCLB (2001) recommend that teachers are required to use research-based practices.
- Student performance in various skills should be the criteria.
- We want our teachers and professionals to use the best practices with our children.

4. **What is NOT Evidence-based?**

- Based on anecdotal reports
- No data to support the strategy
- Incomparable results
- Extraordinary claims to cure autism
- Fancy advertisements, media hype, or based on emotions
- Provided by quacks or charlatans

5. **Consequence of Using Unproven Strategies**

- Waste of time, money, and resources
- Create false hopes in parents/professionals
- Some strategies are actually dangerous or can be harmful.
- Example: Not giving vaccines can be fatal.
- Delay in early intervention services
- Simpson (2004):
- Have negative influence on the field.
- Divert attention away from effective practices.
- Slow student progress.
- Little discrimination between effective and non-effective practices.

6. **Evidence-Based Strategies with ASD (Simpson, 2005)**

- There is no universally effective method for students with ASD.
- Best methods come from diverse fields and professionals.
- Several methods that are very effective include-
- Applied Behavior Analysis (ABA) strategies.
- Discrete trial teaching

- Modeling and prompting
- Structured teaching.
- Visual supports and routines.
- Several other ABA strategies (reinforcement, self-management, time delay, etc.)
- Pivotal Response Training

7. Promising Strategies

- Picture Exchange Communication System (PECS). **It now has enough evidence to be considered as an EBP.**
- Incidental teaching
- Augmentative and Alternative Communication (AAC) systems
- Treatment and Education of Autistic Communication Related Handicapped Children (TEACCH)
- Sensory integration
- Social stories

8. Strategies with Research Support

- Highly structured environments
- Predictable routines
- Clear visual cues and prompts (Banda & Grimmer, 2008)
- Foundation based on **ABA theory**
- Teacher-directed learning with clear, repetitive presentations of small chunks of information
- Practice, practice, practice
- Effective use of reinforcement
- Feedback

9. Challenges in USA

- Gap between research and practice.
- Shortage of trained teachers.
- Alternate or emergency certificates.
- Very few programs use behavior analytic methods in teacher training programs.

10. Autism in India

- Autism is an emerging field.
- Epidemiology studies are largely done in hospitals, particularly psychiatric units or general hospitals (Malhotra & Vikas, 2005).

- According to WHO prevalence ranges from 1 to 6 per 1000 (Gupta & Singhal, 2005).
- There is no clear prevalence or incidence rate reported in India. Some under investigation.
- According to Delay and Sigman (2002) many professionals did not consider language as a core deficit in persons with autism.

11. Services in India

- Action for Autism (AFA) in 1990s.
- Several other NGOs started services. However, the demand far exceeds to meet the needs of persons with autism.
- Even special schools for students with intellectual disabilities rejected persons with autism in their settings (Narayan et al., 2005).
- Our goal is to educate children in typical settings, general education classrooms.

12. Challenges using EBP in India

- Awareness among parents, professionals, public, and policy makers.
- In India, recognition of autism symptoms through diagnosis and treatment are influenced by culture (Daley, 2004).
- Lack of assessment tools (screening, diagnosis, and program planning). Some studies are published on CHAT, CARS, etc. However, more assessments need to be standardized and validated in Indian context.
- Treatments based on other models (e.g., intellectual disability) might not be sufficient to meet the needs of persons with ASD.

13. Opportunities & Vision

- Develop service delivery models that meet the needs of children with varied ages and types.
- Collaboration between NGOs and government organizations to expand services.
- Advocacy.
- Person-centered planning based on needs of individuals with ASD.
- Including families in decision making.
- Personnel preparation programs (combined program ID & ASD; General Education & Special Education; Special Education & Developmental Disabilities).
- Collaborative opportunities within India and abroad to test best treatments or service delivery systems.
- Training related service personnel.

During question-answer session many issues were discussed like “How you assure the quality of Expanded Curriculum (Visual Impairment) in USA for Distance Education Programmes?”, the inputs in Public Schools(Regular Schools) for the education of children with Special Needs etc.

SCIENTIFIC SESSION- 2

Session started in two focus groups and came with some suggestive areas by keeping in mind the following questions:

1. What is the research needed when working with Special Needs Students?
2. What research activities are you engaged in to know about?
3. How can we collaborate on research endeavours?

FOCUS GROUP-I

Chairperson : Dr. Nora Griffin-Shirley

Members : 1. Dr. J.P.Singh
2. Prof. S.R. Mittal
3. Mr. A.K. Mittal
4. Dr. Varsha Gathoo
5. Dr. Hemlata
6. Ms Nandita Saran
7. Mr. Deepak



Focus group- I came with the following suggestive points:

- Research has been associated with degree programs.
- What research has been completed; compile it and make it available to professionals in VI field.
- With general education teachers who have 60-70 students in their classrooms with 2-3 students with disabilities, how do we meet their needs? What support mechanisms are in place to help them?
- Concerning AT: teachers need to be adequately taught to use the technology and then be able to teach students with VI.
- Deafblind: research to look at how to make people aware of deafblind; development of AT for deafblind; inclusion of deafblind into regular education
- Upgrade education for teachers from diploma level to higher level
- Students with VI and multiple impairments: service models are not available in inclusive settings
- Deafblind: adequate IQ tests; functional assessments are completed now but a need exists for a standardized assessment tool especially to diagnose children who are VI and autistic.
O&M for deafblind; AT; livelihood; best educational practices; incidence/prevalence study; follow-up for transition
- Research efficacy of program: training of community worker, who works with families in construction sites to identify children with disabilities, provides training to parents and explains their rights.
- Development of low cost AT for all
- Impact of teacher training programs offered through distance education at all levels
- Impact of foundations course on teachers: pre/post test
- What are common needs of all students with disabilities?
- Can special education teachers be trained for all? What is the maximum limit for teachers?
- How do we support research activities? Who are the most competent agencies to coordinate research?
- What are the best practices in India?
- India needs a protocol for conduction and evaluation of research incorporating ethics.

- Communication of deaf – who decides best communication system? Impact of informed choice for parents of effective communication system for their child? Efficacy of communication system?
- Matching learning styles of students with deafness and teaching styles of their teachers: At the basic training level provide training in this area and evaluate its impact from the students with deafness point of view. Look at the impact of teaching learning materials used.
- Primary disability course vs. interdisciplinary course: does it make any difference in child's achievement?
- Development and dissemination of assessment tools.
- Rural area: for students who reside in these area and only have the general education setting available for schooling what general education supports are available?
- What strategies are needed to change the negative attitudes of society toward people with disabilities?
- Involve all stakeholders in research activities.

FOCUS GROUP-II

Chairperson : Dr. Devender Banda

Members : 1. Mrs. Prabha Ghate
2. Dr. Subodh Kumar
3. Dr. Vasudha Prakash
4. Dr. Gita Srikanth
5. Mrs. Niharika Nigam
6. Mr. Ajay Kr. Singh



Focus group- II came with the following suggestive points:

- School readiness program 0-3 years
- Transition issues, school to work, and early intervention to preschool.
- To study the impact/effectiveness of Inclusive Education with regard to Children with Intellectual Disability.
- What inhibits research in special education in India? What are some complexities in conducting research with students with special needs?
- What are some research methodologies that can be used to do special education research?

- RCI should come up with norms for research and form an informal group about research designs/methods.
- What are some curriculum adaptations in general education classrooms?
- Assessments/tools that need to be adapted in the area of visual impairment.
- We should investigate one area and try the method with different populations, severities, age groups, locations, etc.
- Research topics should come from the field, based on the needs
- Studies on prevalence of autism and other disabilities need to be conducted.
- How many children with ASD receive services? This should be done with other disabilities as well.
- Studies on early identification and intervention in different disabilities.
- Determine how many continuing education hours or programs required for professionals.
- Effects of dance, music, movement, etc. on children with disabilities
- What are the needs? We should conduct needs assessment and determine areas of research.
- Studies on reducing problem behaviours.
- Post secondary education and job issues. How many people are employed and what is the success rate?
- Parental attitudes towards general work environment.
- Attitudes of employers and other employees towards persons with disabilities.
- Attitudes of non-disabled children towards children with Disability.
- Correlation studies
- Studies on people with disabilities at college level
- Health and nutrition of children with disabilities
- Attitudes of doctors and paediatricians towards disabilities
- Studies comparing rural and urban areas
- Effectiveness of resource room teaching and its implantation

2nd Day, 10th March, 2011

SCIENTIFIC SESSION - 3

Service Delivery Models for Persons with Visual Impairment or Autism Spectrum Disorders (ASD)

Chairperson : Maj. Gen (Retd.) Ian Cardozo, AVSM, SM

Speakers : 1. Dr. Nora Griffin-Shirley
2. Dr. Devender Banda

Dr. Nora Griffin-Shirley in her presentation highlighted the 'Service Models for Persons with Visual Impairments'. She concluded the following points:

1. Early Intervention Services in USA

- Mandated by Education for All Handicapped Children Act Amendments of 1986 (P.L. 99-457): early education for children with disabilities from 3 years & a system for birth to 3 years
- Agency providing services may not be educational; services in home or center-based
- For 3-5 year olds, services can be provided in preschool classrooms in daycares, agencies for people with VI, public schools.

2. Early Childhood Intervention

- For 5-8 year olds, students are in the educational system.
- Family-centered rather than child-centered
- IFSP developed for children birth to 3 years
- Stresses natural environments; opportunities for scaffolding where children initiate activity, allows for developmentally appropriate practice (DAP)
- Inclusion for children with VI may only be suggested if the ECI program can meet their needs.

3. Suggestions for Educators/Families

- Provide opportunities for incidental learning
- Recognize children with VI learn from parts to whole
- Use concrete learning experiences
- Do not use developmental checklists that list skills by age level – use process-oriented approaches

- Identify what the child can see & describe what he does not see
- Stress following walls with hands
- Increase amounts of sensory input
- Encourage physical movement

4. **Education of Students with Visual Impairment**

- Consultant Model
- Itinerant services
- Resource room model
- Settings designed specifically for students with VI

5. **Settings Designed Specifically for Students with VI**

• **Special day schools**

- a. For preschoolers with additional disabilities
- b. TVIs with special knowledge of students with severe needs

• **Residential Schools**

- a. 52 school in 42 states
- b. 9% of students with VI attend
- c. Outreach departments
- c. Not segregated
- d. Short-term placements

6. **Rehabilitation**

- Federal-state vocational rehabilitation system
- U.S. Department of Veterans Affairs
- Private not-for-profit organizations

7. **Rehabilitation Services**

- Center-based
- Community-based
- Low vision services

8. **Aging Network**

- Collaboration between aging providers & rehabilitation agencies for people with VI
- Local area agencies on agency provide services to older adults with VI to help them stay in their homes.
- Services: transportation, congregate meals, meals in their homes, health care, grocery shopping, home repair, housekeeping, etc.
Nursing homes & assisted living facilities

9. Professionals Serving Adults with VI

- Vocational rehabilitation counselors
- Ophthalmologists
- Optometrists
- Clinical low vision specialists
- Low vision therapists
- Rehabilitation teachers
- Rehabilitation counselors

10. Curriculum

- Low vision assessment & training is use of aids
- Low vision therapy
- Independent living skills training
- Counseling & advocacy training

11. Transition

- Life-long process
- Limited placements after 22 years for those with additional disabilities
- Lack of highly qualified professionals
- Funding issues

Dr. Devender Banda in his presentation highlighted the “Service Delivery Models for Persons with Autism Spectrum Disorders (ASD)”.He concluded the following points:

1. Guided by principles of
 - Least restrictive environment
 - Normalization
 - Civil rights movement
 - Changing intervention options
 - Parent advocacy
2. More than 80% of the school day spent in general/regular education classrooms.
3. According to the US Dept of Education (2009):
 - 3.13 million (52%) attend regular education
 - 1.6 million resource room (27%) **LRE**
 - 1.06 million separate classroom (18%)
 - 180 k in separate schools (3%)
 - 36 k in residential facility (.59%)
 - 26k in home or hospital (.43%) **MRE**



4. Professionals Involved

- General education teachers
- Special education teachers
- Related service providers:
 - School psychologists
 - Counselors
 - Speech/Language therapists
 - Social workers
 - Administrators
 - Paraprofessionals (instructional assistants, teaching assistant, aides, etc.)
 - Other specialists (PT, OT, Adaptive PE, Mobility specialist, nurse, etc.)

5. Special Education Process

- Referral
- Assessment (multidisciplinary team/IEP team)
 - Determine whether the student is eligible for special education under the law.
 - Disability must impact education.
 - IEP and related services
 - Decision on placement

6. Services for Students with ASD

- Impact due to rise in ASD diagnoses.
- No longer considered a low-incidence disability.
- More children with ASD are included in general education classes now.
- More demands are placed on general education classrooms.

7. Children with ASD in USA

- 2005-2006 School Year (U.S. Department of Education, 2007)
 - 31% of students with ASD are educated in general education classrooms.
 - 18% in resource rooms.
 - 40% in separate classes.
 - 10% attended special schools or residential facilities.
 - Overall, at least 50% or more are in least restrictive environments.

8. Service Delivery Models in USA

- Early Intervention
 - IDEA, Part C: The Early Intervention Program for Infants and Toddlers with Disabilities (0-2 years).
- Services for school-aged students (3-21 years; IDEA, PART-B).
 - General education
 - Resource room
 - Separate classrooms
- Developmental disability centers (private, university affiliated, state centers).
- Residential services (mostly adults with severe/profound disabilities).

9. General Education Classrooms for Students with ASD

- Strategies in GE Classrooms (Schwartz et al., 1999)
 - Teach communication and social competence
 - Systematic instruction (Modeling, prompting, fading, reinforcement)
 - Provide opportunities for interaction with typical peers
 - Use strategies that maintain class flow
 - Naturalistic teaching opportunities
 - Prompts and cues
 - Teach and provide opportunities for independence.
 - Build classroom community that includes all children.
 - Promote generalization and maintenance of skills.

10. Challenges in USA

- Poor outcomes due to shortage of trained personnel.
- Most school districts go by law and often not based on the needs of students.
- Most teachers are certified in non-categorical areas in special education.
- Problems with pre-service training.
- Little training in applied behavior analysis methods.

11. Special Education Service Delivery in India

- Mostly provided by NGOs.
- Lack of sufficient trained personnel.
- Limited training programs (NGOs or university-based).
- Very few studies on service delivery.

12. ASD Service Delivery Models in India

- ASD is covered under National Trust (National Trust for Persons with Autism, CP, MR and Multiple Disabilities Act, 1999).
- Narayan et al. (2005) conducted a study at NIMH.
 - Surveyed 781 special schools and 182 principals responded.
 - Of 18,283 total enrolled students, 932 (5%) had ASD.
 - 82% of teachers did not have any qualification to teach students with ASD.
 - 62 children were followed at NIMH.
 - A majority of children received home-based services (47%), followed by special schools (26%), and inclusive schools (20%).
 - Persuading regular school administrators was difficult.
 - Teachers in special schools need training to manage students with ASD.
 - Awareness creation is very important.

13. Challenges in Service Delivery

- Lack of awareness.
- Access to services (urban and rural areas).
- Lack of trained professionals/teachers (knowledge, skills, and competencies).
- Very few diploma/certificate programs.
- Lack of funding (private and government).
- Law and regulations.
- Quality assurance (Lakin, 1987)
- Structure, process, and outcomes.

14. Opportunities for Collaboration

- Investigate the efficacy of early intervention services, particularly using ABA methods with children with ASD.
- School readiness programs. Service delivery model that prepares children to be included in general education classrooms (transition to school).
- School-based service delivery (general education, special education classrooms, resource room).
- Community-based service delivery across age groups.
- Transition from school to adulthood, employment, and beyond.
- Adapting and testing the efficacy of established treatment methods in Indian conditions.

Ms. Geet Oberoi, Founder Director of Orkids: A Multidisciplinary Clinic gave a presentation on “Learning Disability” giving an insight into their activities and research endeavours:



- On site partners with the University of Connecticut, CT, USA and Haskins Laboratory to conduct Research Program - Indo US Psycholinguistic Study.

- Effectiveness of Intervention in Learning Disabilities

She also talked about Status of LD in India with reference to, LD not included in the PWD Act (however is included in the new draft), lack of awareness, lack of capacity building (teacher training),lack of service providers, misdiagnosis.

Dr. Hemlata, Dy. Director, National Centre for Disability Studies (NCDS) – IGNOU



talked about need for Human Resources for Rehabilitation of PWDs, challenges in Rehabilitation Services about the vision, mission and objectives of NCDS and the various programs offered under it. She also talked about the challenges in Rehabilitation Services for the Persons with Disabilities. She further mentioned about the lack of Human Resources and their causes.

Ms. Gita Srikanth, Director WeCAN presented on “Rehabilitation and Autism” explaining the activities that are undertaken at the center and the possible research topics which included:

- Transition: For ‘school readiness’ of children between 2 and 5 years of age.



- Prerequisites skills for older individuals from special schools to employment.
- What are the employment options in India?
- Seasonal mood disorders



Professor Anita Julka from National Council for Educational Research & Training talked about The Department of Education of Groups with Special Needs (DEGSN) at NCERT NCERT which focuses on inclusion of children and youth with disabilities, children belonging to scheduled castes, scheduled tribes and minorities in Education.

She also emphasized on major programs, some of which included:

- An Exploratory Study of Home Based Education Practices for Children with Special Needs in SSA
- Developing an index for Inclusive Schools-The index is structured to be an evaluative tool for developing learning centres to be more inclusive in their philosophy and practices
- Development of Braille Literacy Curriculum for schools
- Training of Primary School Teachers on Assessment and Remediation of Learning Problems in Students with Attention deficits Hyperactivity Disorders (ADHD) and many more.

Mr. A K Mittal from All India Confederation of the Blind explained its wide array of services in the areas of Education, Training Courses, CBR Programs and other services. He also mentioned that in the last year, AICB concluded two projects which are as follows:

- Assessment of Blindness Compensatory Skills among Visually Impaired Students of



Classes 4 & 5 in Government Schools under SSA.

- Participation of Blind Youth and Women in Organizations Working with the Blind in Some Asian Countries



Dr. Nidhi Singhal from Action for Autism (AFA) talked about the research unit at AFA called “Anvay School of Research & Trainings” with Focus to build upon training programs and research in India that is meaningful, useful and applicable for persons with autism and parents and professionals working with them. She also talked about the various translation and validation studies that the unit has undertaken and also about the Assessment Kit for Autism that is being

worked upon to enable identify children as young as 18 months old and facilitate referral to specialists. Dr Singhal also spoke about the current epidemiological studies that are underway at AFA and some of the research projects focussed on awareness about autism in India. She also mentioned the current research partnerships with MIT and UCLA.

Dr. Varsha Gathoo shared her recent experiences of Service delivery Models in USA particularly in the area of Hearing Impairment and compared with the existing services in India. She also talked about the brief research activities and training programmes of AYJNIHH, Mumbai.



Mr. Deepak Sharma explained the comprehensive approach of ‘Sense International for education and rehabilitation of deaf-blind children and adults. The following issues were highlighted for Special educator training and development



- Advocacy
 - International
 - National
 - State level
- Medical evaluation and support
- Research and information assimilation
- General awareness building
- Corporate and social involvement through fundraising and community involvement

Dr. Arun Banik talked about the activities of NCDS, IGNOU for the education and rehabilitation of persons with disabilities. He showed desires to promote and strengthen the research activities of Special Education in collaboration with RCI & TTU, USA.

Ms. Nandita Saran talked about the following vital activities in National Association for the Blind, Delhi:

- Preparatory unit: Preparing the younger children for studies in an integrated set-up
- Integrated Education: Acts as a resource centre for children studying in an inclusive set-up
 - Organizing computer training programmes
 - Developing E-text library
 - An initiative has been taken for developing programming skills in persons with visual impairment.
 - Assessing the need of deafblind and multiple handicapped children in north India
 - Developing material for screening and identification of deafblind and MSI children
 - Preparing need based literature for organizations, parents and special educator on deafblindness/multiple disabilities



Ms. Anuradha Bagchi explained the vision and services available for the rehabilitation of Deaf & Deafblind at Hellen Keller Institute for the Deaf & Deafblind. She briefed the following areas of activities:

- Education
- Education oriented towards job opportunities
- Vocational Training & Rehabilitation
- Becoming confident & independent to manage their life to the best of his abilities



The two days seminar ended with the vote thanks by Dr. J.P. Singh, Member Secretary, RCI.

Recommendations

Based on the participants and our perceptions the following recommendations are suggested to RCI:

1. To have a follow-up seminar with the same participants and resource personnel to discuss further steps and exchange knowledge. All participants would provide a research proposal including a budget, goals, and personnel required, timeline, etc. to present and discuss during the seminar.
2. To develop an expert panel in each disability area to identify and compile the existing research in their area. The panel can make recommendations for future research needs, develop request for proposals and review grant proposals.
3. To begin and fund pilot studies in the areas of autism and visual impairments looking at intervention and/or service delivery.
4. To initiate research to determine the efficacy of distance education programs.
5. To encourage agencies and universities to form IRB panels which need to include parents of children with disabilities and community members, including those with disabilities.

Drs. Griffin-Shirley and Dr. Banda are very interested in assisting RCI and others in these above-mentioned recommendations. We are poised to assist with research in areas of distance education and intervention studies.



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Appendix 1

Notes from focus groups at Autism for Action, March 9, 2011, New Delhi, India

The question posed to the seminar participants was:

What is the research needed when working with special needs children?

Group 1 Facilitated by Nora Griffin-Shirley

- Research has been associated with degree programs.
- What research has been completed; compile it and make it available to professionals in VI field.
- With general education teachers who have 60-70 students in their classrooms with 2-3 students with disabilities, how do we meet their needs? What support mechanisms are in place to help them?
- Concerning AT: teachers need to be adequately taught to use the technology and then be able to teach students with VI.
- Deafblind: research to look at how to make people aware of deafblind; development of AT for deafblind; inclusion of deafblind into regular education
- Upgrade education for teachers from diploma level to higher level
- Students with VI and multiple impairments: service models are not available in inclusive settings
- Deafblind: adequate IQ tests; functional assessments are completed now but a need exists for a standardized assessment tool especially to diagnose children who are VI and autistic.

O&M for deafblind; AT; livelihood; best educational practices; incidence/prevalence study; follow-up for transition

- Research efficacy of program: training of community worker, who works with families in construction sites to identify children with disabilities, provides training to parents and explains their rights.
- Development of low cost AT for all
- Impact of teacher training programs offered through distance education at all levels
- Impact of foundations course on teachers: pre/post test
- What are common needs of all students with disabilities?
- Can special education teachers be trained for all? What is the maximum limit for teachers?
- How do we support research activities? Who are the most competent agencies to coordinate research?
- What are the best practices in India?
- India needs a protocol for conduction and evaluation of research incorporating ethics.
- Communication of deaf – who decides best communication system? Impact of informed choice for parents of effective communication system for their child? Efficacy of communication system?
- Matching learning styles of students with deafness and teaching styles of their teachers: At the basic training level provide training in this area and evaluate its impact from the students with deafness point of view. Look at the impact of teaching learning materials used.
- Primary disability course vs. interdisciplinary course: does it make any difference in child's achievement?
- Development and dissemination of assessment tools.
- Rural area: for students who reside in these area and only have the general education setting available for schooling what general education supports are available?
- What strategies are needed to change the negative attitudes of society toward people with disabilities?
- Involve all stakeholders in research activities.

Group 2 Facilitated by Devender Banda

- School readiness program 0-3 years
- Transition issues, school to work, and early intervention to preschool.
- To study the impact/effectiveness of inclusion.
- What inhibits research in special education in India? What are some complexities in conducting research with students with special needs?
- What are some research methodologies that can be used to do special education research?
- RCI should come up with norms for research and form an informal group about research designs/methods.
- What are some curriculum adaptations in general education classrooms?
- Assessments/tools that need to be adapted in the area of visual impairment.
- We should investigate one area and try the method with different populations, severities, age groups, locations, etc.
- Research topics should come from the field, based on the needs
- Studies on prevalence of autism and other disabilities need to be conducted.
- How many children with ASD receive services? This should be done with other disabilities as well.
- Studies on early identification and intervention in different disabilities.
- Determine how many continuing education hours or programs required for professionals.
- Effects of dance, music, movement, etc. on children with disabilities
- What are the needs? We should conduct needs assessment and determine areas of research.
- Studies on reducing problem behaviours.
- Post secondary education and job issues. How many people are employed and what is the success rate?
- Parental attitudes towards general work environment.
- Attitudes of employers and other employees towards persons with disabilities.
- Correlation studies
- Studies on people with disabilities at college level
- Health and nutrition of children with disabilities
- Attitudes of doctors and pediatricians towards disabilities
- Studies comparing rural and urban areas
- Effectiveness of resource room teaching and its implantation

Day 2 Discussion Notes

- How to make greater use of technology
- Write proposals
- Development of tools in rural areas
- Development of communication aides
- Distance learning and studies on distance learning models
- Studies on various distance education models
- Impact of distance education programs and faculty exchange programs between universities from abroad
- How can we enrich distance education programs
- Develop assessment tools
- Assess child and family outcomes in early intervention area
- Adapt test and tools in early intervention
- What is the impact of training community workers in early intervention
- How can we sustain early intervention programs through funding?
- Impact of community level programs
- Impact of inclusion
- Study on impact of teacher training in deaf education area
- Research in vocational areas; broaden the scope of vocations
- Evaluation of RCI programs and compare the programs in USA and RCI
- Adapt the methodologies from USA to India
- Effectiveness of implementing training programs for persons with disabilities
- How can improve or upgrade teacher training programs
- What strategies or methodologies can be used in teacher training programs
- Research in the area of motor skills and exchange of resources
- What makes successful inclusion
- What should we adapt in Indian context

Annexure-1

Organizing Committee

Chairperson Maj. General (Retd.) Ian Cardozo Chairperson, RCI	Programme Execution Dr. J.P. Singh Member Secretary, RCI
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Chief Editor Dr. J.P. Singh Member Secretary, RCI	Co-editor Dr Nidhi Singhal Director, Research & Training, Action For Autism
Acknowledgement All Staff Members, RCI & Action for Autism, Print and Electronic Media	

Programme schedule

Wednesday, 9 March 2011

- 10:00 – Registration and Coffee
10:15
10:15 – Opening Comments
10:20 *Gen Ian Cardozo, Chairperson, Rehabilitation Council of India*
10:20 – Introduction to the seminar and speakers
10:30 *Dr JP Singh, Member Secretary, Rehabilitation Council of India*
10:30 – Education and Rehabilitation for Persons with Visual Impairments
11:30 and Personnel Preparation in the USA
Dr Nora Griffin-Shirley, Director, Texas Tech University Virginia Murray Sowell Center for Research and Education in Sensory Disabilities
- 11:30 – Evidence-based Practices for Persons with Autism Spectrum
12:30 Disorders
Dr Devender Banda, Assistant Professor, Texas Tech University Special Education Program
- 12:30 – 1:30 Lunch
1:30 – 2:15 Service Models for Persons with Visual Impairments and Blindness
Dr Nora Griffin-Shirley, Director, TTU Virginia Murray Sowell Center for Research and Education in Sensory Disabilities
- 2:15 – 3:00 Service Models for Person with Autism Spectrum Disorders
Dr Devender Banda, Assistant Professor, TTU, Special Education Program
- 3:00 – 3:15 Tea Break
3:15 – 3:30 Introductions for Focus Group Activity
3:30 – 4:15 Focus Group on possible collaborative efforts resulting in funding for joint research projects focusing on personnel preparation and service delivery for persons with disabilities
4:15 – 4:45 Wrap-up with question and answer session

Thursday 10 March 2011

- 9:30 – 10:00 Coffee
- 10:00 – 10:30 – Research at Texas Tech University in the area of special education
10:30 Presentations by Representatives from National Institutes
- 10:30 – 12:30 – Current Research Projects And Future Interests And Endeavors
12:30 Lunch
- 12:30 – 1:30 Evidence-based Practices (EBP) in Autism Spectrum Disorders and
Incorporating EBP in Personnel Preparation Programs
Dr Devender Banda, Assistant Professor, TTU, Special Education Program
- 1:30 – 2:15 Personnel Preparation of Teachers of Students with Visual
Impairments and Orientation and Mobility Specialists
Dr Nora Griffin-Shirley, Director, Texas Tech University Virginia Murray Sowell Center for Research and Education in Sensory Disabilities
- 2:15 – 3:00
- 3:00 – 3:45 Wrap-up with question and answer session
- 3:45 – 4:00 Closing Remarks
Gen Ian Cardozo, Chairperson, Rehabilitation Council of India
- 4:00 Coffee

List of Participants

S.No.	Name & Address
1.	Maj. Gen (Retd.) Ian Cardozo, AVSM, SM, Chairperson, Rehabilitation Council of India, New Delhi-16
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7.	Dr. Varsha Gathoo, Head of the Department, Department of Education Ali Yavar Jung National Institute For The Hearing Handicapped, K.C. Marg, Bandra (W), Mumbai - 400 050
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