

Community Participation- A Tool for Advocacy of Rights of the Physically Challenged

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ABSTRACT

The paper speaks about the importance of attitudinal change in the society to ensure the efforts taken by the government to facilitate the protection of the rights of the disabled. The paradigm shift in the Human values as the human beings are treated as subjects and not objects, from values to rights. Social Constructivism is explained with special reference to the role of the society to ensure the protection of the human rights of the physically challenged. Interactivism of the humane participation of the part of advocacy is explained through two (one from foreign, one from India) currently running projects. By citing a judgment of the court given to the physically challenged in protecting his right, the need for community participation is stressed. A typical survey on the availability of the online literature suggests the need for community participation.

Introduction

Man is a social animal. Any man is under the clutches of the society that includes him. Society is a complex system that requires cooperation from various facets to be a civilized society. A man becomes more humane when he understands the rights of the other human beings. In an ideal society, everybody would be aware of their rights and realize and perform their responsibilities towards the society.

The culture of a society will decide the living conditions of the people. India's cultural heritage is rich. Indian culture has taught many values to the world. Basically human rights are not an element of constitution, but a matter of common sense. We have social living systems in built in our culture that paves way for proper exercise of human rights. The society serves as the background for the well being of men.

In a systematic society, each and every member will have well defined roles and responsibilities vested with one another. Each and every member even people with disabilities will be socially contributing members. An ideal society will be sensitive towards equal participation of the physically challenged in the social walks of lives.

Over the years disability policy developed from elementary care at institutions to education for children with disabilities. Government has been incessantly making policies to ensure good standard of living for the physically challenged. But as long as there is change in the attitudes of the public, the outcomes cannot be effective.

Through education and rehabilitation, persons with disabilities became more active and a driving force in the further development of disability policy. Organizations of persons with disabilities, their families and advocates were formed, which advocated better conditions for persons with disabilities. After the Second World War the concepts of integration and normalization were introduced, which reflected a growing awareness of the capabilities of persons with disabilities.

Towards the end of the 1960s organizations of persons with disabilities in some countries started to formulate a new concept of disability. That new concept indicated the close connection between the limitations experienced by individuals with disabilities, the design and the structure of their environments and the attitude of the general population. At the same time the problems of disability in developing countries were more and more highlighted.

When we think about the treatment of the society towards the people who are physically challenged, it has to be looked at two levels; attitude of the society and the behaviour of the physically challenged. Though they seem to be two different dimensions, they are indeed; two sides of the same coin.

Human Values - the Human Being as Subject and Not Object

The core values of the human rights mission underpin a system of basic freedoms that affords protection against the abuse of power and creates space for the development of the human spirit. Four values - dignity, autonomy, equality and solidarity - are of particular importance, both in general terms and in the context of disability.

Human Dignity and the Social Construct of Disability

Human dignity is the anchor norm of human rights. Each individual is deemed to be of inestimable value and nobody is insignificant. Owing to their relative invisibility, people with disabilities were often treated in the past as objects to be protected or pitied. The crucial change came when they saw themselves (and were seen by others) as subjects and not as objects.

The “medical” model of disability has frequently been contrasted in recent years with the “human rights” model. The medical model focuses on persons’ medical traits such as their specific impairments. This has the effect of locating the “problem” of disability within the person.

The human rights model focuses on the inherent dignity of the human being and subsequently, but only if necessary, on the person’s medical characteristics. It places the individual centre stage in all decisions affecting him/her and, most importantly, locates the main “problem” outside the person and in society. The “problem” of disability under this model stems from a lack of responsiveness by the State and civil society to the difference that

disability represents. It follows that the State has a responsibility to tackle socially created obstacles in order to ensure full respect for the dignity and equal rights of all persons.

Another way of making the same point is to describe disability as a “social construct”. This idea is quite simple and straightforward although it is often clouded by theoretical analysis. The first premise of the “social construct” model is that human difference is not innate but something socially constructed and applied through labels such as “the disabled”. Thus, one is not born “black” or “a woman” or “disabled”. One is labelled as such in relation to some unstated norm such as maleness, being white or being able-bodied (for want of a better expression).

The second premise is that the norm in relation to which one is evaluated and labeled (maleness, whiteness, being able-bodied) is generally not selected through a neutral or disinterested process. Selection usually occurs through an apparatus of power whose minimum goal is to preserve that power. Indeed many disability rights advocates consider that “the disabled” should be used instead of “persons with disabilities” precisely in order to highlight the fact that it is society that disables the person.

The third premise of the social construct model is crucial, namely that the social construct of disability is used not only to *set people apart* but also to *keep people apart*.

From Values to Rights: A System of Freedom Built on Human Values

Although the full continuum of human rights conveys an impression of complexity and even chaos, all rights in the continuum hang together. The common denominators are the above - mentioned values of dignity, autonomy, equality and solidarity. From these basic values it is possible to conceptualize the system of basic freedoms that human rights advance and support - a system that is flexible enough to accommodate most socio-economic systems and solid enough to support them. The concept of total rehabilitation envisages the need for social rehabilitation. Sympathy to empathy is the cry of social workers, whom calls for the participation of the community in helping a physically challenged lead a wholesome life.

Advocacy

The functioning of such community institutions can help the people with disabilities advocate their problems and help in quickening the remedies. The agonies undergo by the physically challenged calls for the need for community participation in advocating the rights of the physically challenged.

Dr Raman Khanna vs University of Delhi 2003 V AD (Delhi) 343 Delhi High Court (D/- 11.08.2003) - A Case Study

Courtesy: Ashok Agarwal, Social Jurist, New Delhi

Dr Raman Khanna, applied for post graduation under the reserved handicapped in a Medical College. His application was rejected on the grounds that the degree of his disability

was not acceptable to the MCI and that his case falls out of the limit of reservation contemplated under Section 39 of PWD Act, 1995. There is no reason to doubt the rationale and intention behind the contention of the MCI that a person with relatively milder disability should be preferred against another who suffers from an aggravated condition, so long as the 3 percent minimum reservation is not breached.

The PWD Act obligates an institution to reserve 3% of its seats for physically handicapped, hearing and visually handicapped students. The MCI debar students with hearing and visual handicaps from applying for the course. Based on this, it assumed that only 1% reservation was applicable for persons with physical or locomotor handicaps. This is a flawed assumption, as the law does not state that the 3% reservation has 1% allocated to each of the 3 sub groups of disabilities. Since the law mandates a 3% reservation, the MCI cannot lower the quantum of reservation. Thus, it has to offer this 3% reservation to the category it allows, namely, physical or locomotor handicaps.

The Judgment

The High Court agreeing with the arguments of the petitioner, and directed the MCI to take a fresh decision on the application of Dr. Raman Khanna.

This incident evokes the following questions in our minds.

1. Dr. Raman is a learned man. So he could approach the court and get legal help. What about a layman?
2. The people in the medical admission committee belong to the highest form of apex body. If they cannot ensure the rights of a physically challenged, what would be the fate of a layman who doesnot even know what his rights are?
3. Service delayed is service denied. In the case of Dr.Raman, he could give the time for the court to explore, analyse and justify his stand. What about the people who are in need of immediate remedy and could not wait. The delay in the service would end up in breech of his right.

Interactivism

The answer to the above questions is community involvement and participation of the community members in helping a physically challenged enjoy his rights to the fullest possible extend. It is also important to note that the breech of rights in most of the cases happen due to lack of awareness in the community and lack of empathy.

The key to successfully solving problems of the physically challenged is to get as many members of that community involved.

Crucial methods of social change are through community mobilization. A brief account of a system of social change is briefed hereunder.

A. Community Based Rehabilitation

Community based rehabilitation is basically a philosophy, though relatively new in the kinds of rehabilitation; it replicates the care and protection given by our ancestors. The idea is that the people with disabilities are a part of the community. So he should be rehabilitated in the community, by the community, for the community. Thus by its own efforts, the community earns a contributing member. The ultimate aim of community development is capacity building of all the individuals in the community.

A chapter is run by **Catholic Health Care Services - Archdiocese of Philadelphia**, which is called the **Guardian Angels**. They act as a hub through which a community's divergent groups interact. In some cases, these groups may have problems working with each other.

The Guardian Angels can act as a go-between or neutral party. People are familiar with the term activist. It means a person who is involved in some action for some cause. Usually, most activists simply conform to their own agenda and mission. In many cases this approach works. In fact, the very act of networking and cooperating usually solves the problem by itself.

The Guardian Angels use a term called "Interactivism." They are all activists, whose goal is not only to help solve problems for the community; but also getting the community more involved in solving its own problems. They strive to work diligently with all the community elements to orchestrate a united front of good will and problem solving.

B. Guardian Angels

A chapter is usually started when someone calls the Guardian Angels about a problem in their community. If the community is located near another Guardian Angels chapter, the nearby chapter will act as a liaison in helping to open the chapter, recruit, and train members. If the community is not located near another chapter, that individual may have to visit the nearest chapter for training. If possible, the Guardian Angels may be able to send someone out to open the chapter and train all the locals. The Guardian Angels always try to turn residents into leaders of their own chapter. The residents know their community the best.

The process of opening a chapter is not instantaneous and easy. The last thing anyone wants is a chapter quickly opening and then quickly closing. Communities will simply be turned off by the Guardian Angels and may become even more close-minded to new solutions. We want to build solid chapters with solid foundations.

They teach recruits about the value of dependability, persistence, and responsibility, a Chapter Leader in training must already exhibit these qualities. The Chapter Leader will be the main contact for all other recruits, and he must set the example for them. When people join, when they think of the Guardian Angels, they will think of him.

Indian Scenario

GV Trust, a NGO at Chidambaram, Tamilnadu is running a project called Guardian Angels. In this project, they identify local community volunteers and orient them on general issues of disability rehabilitation. The oriented members are allocated 1/2/3 disabled members of the community. The volunteer is further trained on the specific demands of his kid(s). In due course of time, there will be many volunteers in the community who will look after the rehabilitation requirements of the people with disabilities of their own communities. Thus the rights of the physically challenged are well protected. Such kind of empowerment processes ensures sustainability.

Mitra Jyothi, an NGO in Bangalore conducts a need-based programme, which provides visually impaired individuals with the opportunity to listen to written material that is recorded onto tapes. These are aptly called 'talking books'. These provide convenient access to any kind of literature. Though community radio is based on this idea it is more broad-based and is now gaining currency. The ways in which radio can be used innovatively for the purpose of empowering the disabled are still being explored. This represents a shift in thinking which advocates democratization of the media that would enable people to use it to express themselves in ways that they want.

Conclusion

The paradigm shift in the human rights of the physically challenged is the ray of hope today. The community participation can be tapped through several modes. The growth in the field of information and technology and the emerging groups of advocacy is a unique combination the world would ever have faced. Hence we shall expect the earth to be a better place to live in for those who are deprived of their rights due to their physical impairments.

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