



A STUDY ON PREVALENCE OF CHILDREN WITH DISABILITY IN LOWER SUBANSIRI DISTRICT OF ARUNACHAL PRADESH USING RIGHTS OF PWD ACT 2016

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ABSTRACT

Introduction: Disability is a part of being human. Almost everyone will temporarily or permanently experience disability at some point in their life. An estimated 1.3 billion people (16%) of the global population currently experiences significant disability. This number is increasing due in part to population ageing and an increase in the prevalence of non-communicable diseases.¹ Children are less widely surveyed than adults and there is substantially less consistent, nationally representative evidence on the rates and experience of disability in childhood. Thus, the study aims to estimate the prevalence of children with disability in lower subansiri, Arunachal Pradesh.

Method: A cross-sectional survey was conducted in villages of Ziro, Lower Subansiri by visiting door to door, enquiring anganwadi workers, special schools, NGO centers for disabled and pediatric health workers using the list of disability in RPWD Act 2016 to achieve the greatest number of children with disability.

Result: This study showed that the prevalence of children with disability of Lower Subansiri District is 0.12% of the total children population of Lower Subansiri district, Arunachal Pradesh. Among which the highest disability type found was intellectual disability with 33.3%.

Conclusion: The study result reveals that there are very low prevalence of disability among the children of Lower Subansiri district, Arunachal Pradesh and intellectual disability is the most prevalent disability type.

Key words: Disability, children with disability, lower subansiri, RPWD Act 2016, Arunachal Pradesh

INTRODUCTION

Disability is a part of being human. Almost everyone will temporarily or permanently experience disability at some point in their life. An estimated 1.3 billion people (16%) of the global population currently experiences significant disability. This number is increasing due in part to population ageing and an increase in the prevalence of non-communicable diseases.¹

The World Health Organization (WHO) defines “Disability” as an umbrella term, covering impairments, activity limitations, and participation restrictions. Impairment is a problem in body function or structure; an activity limitation is a difficulty encountered by an individual in executing a task or action; while a participation restriction is a problem experienced by an individual in involvement in life situations. Thus disability is a person’s body and features of the society in which he or she lives.²

According to the Rights of Person with Disabilities Act, 2016, “Person with Disability” means a person with long term physical, mental, intellectual or sensory impairment which, in interaction with barriers, hinders his full and effective participation in society equally with others, and “Person with benchmark disability” means a person with not less than forty per cent of a specified disability where specified disability has not been defined in measurable terms and includes a person with disability where specified disability has been defined in measurable terms, as certified by the certifying authority.

In this Act, the type of disabilities have been increased from existing 7 (as defined in the Person with Disabilities (Equal opportunities, Protection of Rights and Full Participation) Act, 1995) to 21. This inclusion will help more people to have access to the government schemes and facilities intended for the welfare of disabled people in India³

The Act covers the following specified disabilities⁴ :

1. Physical disability
 - a. Locomotor Disability
 - i. Leprosy cured person
 - ii. Cerebral palsy
 - iii. Dwarfism
 - iv. Muscular dystrophy
 - v. Acid attack victims
 - b. Visual impairment
 - i. Blindness
 - ii. Low visions
 - c. Hearing impairment
 - i. Deaf
 - ii. Hard of hearing
 - d. Speech and language disability
2. Intellectual disability
 - a. Specific Learning Disabilities
 - b. Autism Spectrum Disorders
3. Mental Behaviour (Mental Illness)

4. Disability caused due to –
 - a. Chronic Neurological conditions such as –
 - i. Multiple Sclerosis
 - ii. Parkinson's Disease
 - b. Blood Disorder –
 - i. Hemophilia
 - ii. Thalassemia
 - iii. Sickle Cell Disease

5. Multiple Disabilities

According to CRPD, children with disabilities “include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on equal basis’. Children with disabilities are highly diverse population group, they include children who were born with a genetic condition or those who sustained a serious injury, nutritional deficiency or infection that resulted in long-term functional consequences; or those exposed to environmental toxins that resulted in developmental delays or learning disabilities.⁵

As per the census 2011, out of the 121 crore population in India 2.68 crore persons were enumerated as ‘disabled’ which was 2.21% of the total population of which 20.4 lakhs are disabled children with 7.62% from the total disabled population of India. Total disabled children of Arunachal Pradesh accounted for around 7.96% of the total disabled children population in India.⁶

1.2% of the total children (0-6 years) are disabled. The percentage of male disabled children to total male children is 1.29% and the corresponding figure for females is 1.19%. 61% of the disabled children aged 5-19 years who were attending educational institutions, 57% are male children⁷

Children are less widely surveyed than adults and there is substantially less consistent, nationally representative evidence on the rates and experience of disability in childhood⁸. There is available data on children with disability from the latest census. However it is not clear that the data overlap can be generalized after the district bifurcation of Lower Subansiri district and Keyi Panyor District of Arunachal Pradesh as the varying result of the assessment may reflect changes in policy making of each district. Also all the previous statistical study of disability have been conducted using PWD Act 1995 and its seven types of definitions of disability. Whereas amended Rights of PWD Act 2016 is made available which includes 21 definitions of disability. Therefore this study will examine the prevalence of children with disability in Lower Subansiri District of Arunachal Pradesh using RPWD Act 2016.

AIM OF THE STUDY

Primary Objective:

To assess the prevalence of children with disability in Lower Subansiri District, Arunachal Pradesh using RPWD Act 2016.

Secondary Objective:

To estimate the prevalence of different types of disability using RPWD Act 2016 among children in Lower Subansiri district, Arunachal Pradesh.

METHODOLOGY

Study type: Cross-sectional Study

Source of data: Villages of Ziro, Lower Subansiri District

Study Setting: Households, Anganwadi centers, clinics with pediatric health services.

Sampling Method: Purposive sampling

Sample Size:

Inclusion criteria:

- Has any of 21 types of disability (RPWD Act 2016)
- Permanent resident of Ziro, Lower Subansiri
- Permanent Disability with disabled certificate.

Exclusion criteria:

- Disability that doesn't come under 21 types of disability from RPWD Act 2016
- Recently diagnosed health issue.

PROCEDURE

A survey was conducted by interviewing individuals door to door, anganwadi workers of various centers and pediatric health workers using the list of 21 types of disability from RPWD Act 2016. Participants were informed about the purpose of the study and consent were taken before the interview. Researcher made an individual understand about the types of disability and enquired if any members in the family had any type of disability from the list. The data was then obtained and collected in the excel sheet.

The collected data were presented in percentage of the variables in tables. The results were analyzed using Microsoft Office Excel.

RESULTS:

The data analysis includes a total of 15 participants of all gender and age groups (0-18 years).

Table 1: Distribution of age of child

Age of the Child (in years)	Number of the Child	Percentage (N=15)
5	1	6.7%
6	1	6.7%
8	1	6.7%

11	3	20%
14	1	6.7%
15	1	6.7%
16	3	20%
17	2	13.3%
18	2	13.3%

The respondents mean age was 13.2 years. Of all the total 15 participants, the highest number of participants to take part in the study were aged 11 years (20%) and 16 years (20%), followed by 17 years (13.3%) and 18 years (13.3%).

Table 2: Gender Distribution

Gender	Number of Child	Percentage (N=15)
Male	7	46.7%
Female	8	53.3%

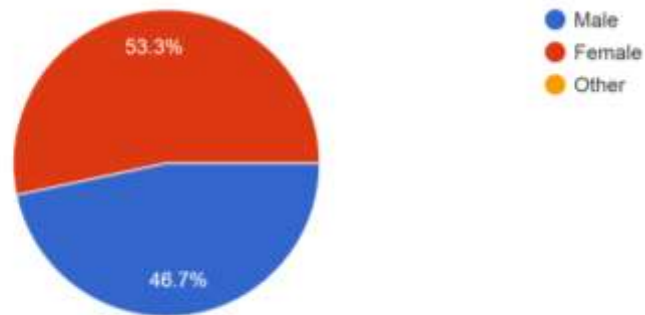


Figure 1: Gender dsitribution chart

In this study, the highest number of participants were female with 53.3% and male were 46.7% (Table 2 and Figure 1).

Table 3: Disability Type

Type of Disability	Number of child	Percentage (N=15)
Cerebral Palsy	1	6.7%
Locomotor disability	2	13.3%
Intellectual Disability	5	33.3%
Speech and language Disability	2	13.3%
Specific learning disability	2	13.3%
Autism Spectrum Disorder	1	6.7%
Multiple Disabilities including deaf and blindness	2	13.3%

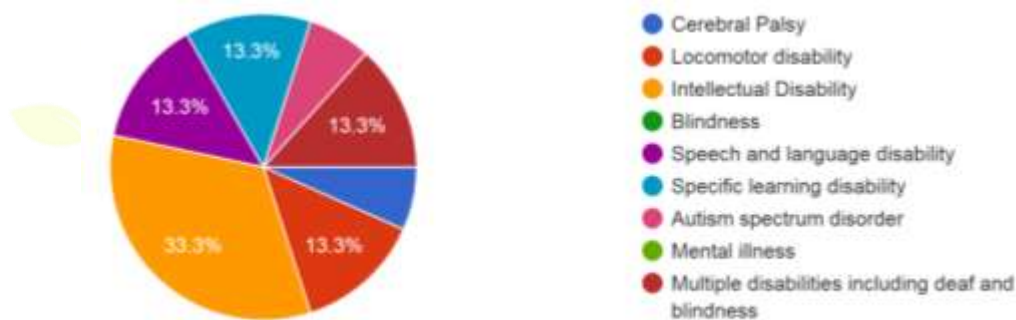


Figure 2: Disability type distribution chart

The prevalence of disabilities among children was 0.12% from the total children population of Lower Subansiri district. There were various type of disability found among participants, highest being the intellectual disability (33.3%), followed by locomotor disability (13.3%), speech and language disability (13.3%), specific learning disability (13.3%), multiple disabilities including deaf and disorder (13.3%), cerebral palsy (6.7%) and autism spectrum disorder (6.7%).

DISCUSSION

The study sought to assess the prevalence of disabilities among children in Lower Subansiri district of Arunachal Pradesh using the Rights of Persons with Disabilities (RPWD) Act, 2016 as the reference framework. The analysis provides significant insights into the age distribution, gender breakdown and types of disabilities among children aged 0-18 years.

Prevalence and demographics

The overall prevalence of disability in India based on secondary data analysis of the NFHS-5 survey (2019–2021) was 0.93% and 5.11% of households have one or more PwDs. Locomotor disabilities accounted for 44.73% of all disabilities, followed by mental and speech disabilities.⁹

In the present study, the prevalence of disability was found to be 0.12%, which shows a low prevalence of disability and it notably presents a positive aspect of the result, nevertheless is crucial to consider. Among the 15 children studied, the mean age was 13.2 years. The largest proportion of children with disabilities was observed at the ages of 11 and 16 years, each representing 20% of the total sample. In terms of gender, 53.3% were female and 46.7% were male, indicating a slight female predominance in the recorded cases. This might reflect differences in cultural perceptions, or reporting biases, which merit further exploration.

Types of Disabilities

The study documented a wide range of disability types, as categorized under the RPwD Act, 2016; Intellectual Disability was the most common, affecting 5 children (33.3%). Locomotor disability, speech and language disability, specific learning disability, and multiple disabilities (including deaf-blindness) each affected 2 children (13.3%). Autism spectrum disorder and cerebral palsy were reported in 1 child each (6.7%). This distribution reflects the diversity of disability types encountered in the region and underscores the need for a multi-disciplinary approach in diagnosis and intervention.

Implications of RPwD Act, 2016

The RPwD Act, 2016 mandates equal rights and access to service for persons with disabilities, including children. The identification of multiple disability types in this small sample reinforces the importance of early detection and intervention.

CONCLUSION

The study result reveals that there are very low prevalence of disability among the children of Lower Subansiri district, Arunachal Pradesh and intellectual disability is the most prevalent disability type.

The key limitation of this study is that it lacked total population data. Also, that the data obtained for this study was based on self reporting, referrals, special school enrollment and enrolment at anganwadi centers which lead to small sample size. Thus, the prevalence may vary which consequently will effect the prevalence of disability type. The study revealed low prevalence of disability among children in Lower Subansiri district, Arunachal Pradesh, however, irrespective of its magnitude, it is crucial to recognize each children with disability and their potential contribution to the society, which will culminate in better future for all children with disability.

The utilization of rehabilitation services among the children with disability of Lower Subansiri district is nonexistent, therefore, it is imperative that the government takes proactive measures and consider implementing initiatives and policies to cater the needs and enhance the quality of life for children with disabilities.

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