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Grants and Resources for Sustainability
PREMIUM



Holistic Development of Children with Disabilities

What is the rationale for the project?

[Kindly establish the need for the project, your rationale for selecting the project location etc.

Please mention valid source for any information or statistics used]

The WHO has identified over 1 billion disabled people of whom 93 million (almost one in ten) are children. 20% of these people live with great functional difficulties in their day-to-day lives and to be more precise this constitutes for:

- 3.2% with blindness and visual impairment
- 6% with deafness and hearing loss
- 2.6% with intellectual disability (IQ below 75) and
- 1% that use the wheelchair on a daily basis

It is obvious how disability limits one's functioning and restricts natural processes of a human body but with that it also brings along barriers to accessing health, education, transportation, information and work services thereby impacting the quality of life. Studies reveal the following facts pertaining to how disability impacts the lives of PWDs.

- 1 in 2 disabled person cannot afford treatment;
- they have a more fragile general health;
- it increases their dependency and limits participation in society and
- the poverty rate is higher for them

The issue requires providing means that identify impairments timely (a secondary prevention) thereby reducing the impact of the impairment on the functional level of the individual and also in checking the impairments from becoming a disabling condition.

Georgia, a country located at the intersection of Eastern Europe and Western Asia, has a population of **4,024,180** with **1,18,651** persons registered as disabled and recipients of state social assistance (2015) that constitutes only 3 percent of total population residing in Georgia. Data on disability in Georgia being very limited and fragmented displays the lack of concrete statistics and makes it impossible to discern the real picture of the problems and the needs of disabled persons and their families.

On the basis of our previous work and studies conducted in the project site, it is evident that the need of the hour is to promote community based rehabilitation along with strengthening the fundamentals of inclusive education framework. There is a need to make the education system more accessible for the children with disabilities and also enhance rehabilitation services for the children, so as to improve their health and skills.

What is the project aim and objectives?

[What is the purpose of the project? What are the key objectives? Please make sure the objectives are Specific, Measurable, Realistic and Time bound]

The project aims to improve the status of children with disabilities in Georgia through timely community engagement. The specific objectives of the project are:

- Objective 1. To develop systems for early identification and screening of children with disabilities in the Imereti Region of Georgia.
- Objective 2. To promote inclusive education by developing a conducive school environment for the children with disabilities in over 50 schools in the project site.
- Objective 3. To improve the lives of children with disabilities through a community based rehabilitation program.

Who will benefit from the project?

The project will benefit over 5000 children with disabilities in the Imereti Region of Georgia. Imereti is a region of Georgia situated in the western part of the republic along the middle and upper reaches of the Rioni River. Imereti is the most populous region in Georgia. It consists of 11 municipalities and the city of Kutaisi, which is the capital of the region. (Wikipedia, 2021)



How do you plan to implement the project?

[Explain in detail how you intend to achieve the objectives of the project. What are the key activities?]

Objective 1. To develop systems for early identification and screening of children with disabilities in the Imereti Region of Georgia.

- 1. Survey of the area to identify the children with disabilities:** We shall undertake an in depth study of the project site to identify the children with disabilities. We will gather the necessary information from the government records and statistical department on disability. Once we have the secondary information with us, we will undertake a primary survey of the project site to get exact details on CWDs in the area.

We shall be using special survey tools, to identify the disability and also develop individual profiles of the children with disabilities. We shall conduct the survey both at the household level to identify the children with disability below the age of 4 years and in schools to identify the children who are above the age of 4 years and are enrolled in schools. We shall categorise the collected data into age, type of disability, severity, distance from the nearest school, illiterate/literate, literacy level of parents, income of parents, support from government etc. The data will be compiled, analyzed and disseminated to all the stakeholders in the form of a situation analysis report.

Awareness of teachers and parents: We will also conduct a comprehensive awareness drive for teachers and parents for the early detection and prevention of disability amongst children. We shall be organising workshops and special help camps to shed light on the topic and make the masses aware of the types of disabilities and their symptoms so that they are identified as soon as possible at home by the parents and outside (schools etc.). Moreover, enlightening people to create an environment that is socially inclusive and empathetic towards people with special needs and readily available to lend a hand for help when required.

- 2. Disability Screening:** Disability screening helps to assess the slightest probable disability a child might have, more accurately, thereby nipping it in the bud before it grows bigger. It is usually conducted in the form of targeted individual medical assessment of a child or administration of a brief questionnaire to parents without the child even being present but the idea is to make screenings more economical and readily available to all. Screening tools that measure different types of functioning accurately have good reliability are open-source or inexpensive (accessible to all) and could be administered by adults with basic training rather than medical or developmental specialists (as specialists in many low- or middle-income contexts are in short supply). These are better than the assessments based on self-reports or caregiver or teacher perceptions of a child's functioning, which may or may not accurately reflect a child's ability.

Objective 2. To promote inclusive education by developing a conducive school environment for the children with disabilities.

To improve the overall growth of children, it is important for them to attend school. It has been often seen that schools do not have a conducive environment for CWDs and as a result many specially abled children do not attend school. Towards improving the environment in schools and classes, we would undertake the following activities.

Mapping the existing educational facility: We will undertake an assessment of the existing infrastructure of schools. We shall look at the following facilities and behaviour:

- distance from the road side
 - walking distance
 - ramp for disabled
 - toilet for disabled children
 - support staff for taking care of children with disabilities
 - recreational activities for children with disabilities
 - place for parents to sit, while their children study
 - pick van for disabled children
 - furniture to suit the requirement of special children
 - attitude of teachers towards special children
 - attitude of other students towards special children
- **Recommendations for developing a conducive environment for children:** Based on the results of the mapping exercise we shall give our recommendations to make the school conducive for the special children. Our experts will work with the school authorities to improve their infrastructure by adopting simple tools to make it more convenient for special children.
 - **Training of teachers:** Our experts will also provide training sessions to staff members to make them aware about the needs of CWDs and also on ways to deal with CWDs in school. This would help in making the school enjoyable and convenient for the CWDs. .
 - **Awareness of children:** We shall also conduct awareness sessions for the children to understand the concept of disability and make them more accommodative towards special children. Along with screening documentaries, talk shows and sessions from experts, we will also organize inclusive school competitions like debate, sports, painting, quiz, etc. to involve CWDs in these events.

Objective 3. To improve the lives of children with disabilities through a community based rehabilitation program.

Community Based Rehabilitation is a strategy that is implemented through the combined efforts of people with disabilities, their families and communities, and relevant government and non-government health, education, vocational, social and other services (WHO). To ensure that special children have improved lives, we shall include all the community members to participate in the project and make the project a success. The following activities have been envisaged to involve the community:

- Stakeholder consultations
- Fostering partnerships with local authorities and community
- Networking with hospitals and clinics
- Awareness sessions
- Health camps
- Distribution of necessary medicines, equipment for special children
- Advocacy efforts with stakeholders
- Vocational training for disabled youth
- Organising community events etc.

With the support from parents, teachers, community, local authorities and local hospitals, we will facilitate an ecosystem to improve the lives of CWDs.

Give Details of your organization:

Our organization has been working in Georgia for the past 12 years and have worked on various aspects of community development. Over these 12 years we have realised that disability is a serious issue and requires immediate attention. We have undertaken a study on disability in Georgia and in this direction have also started undertaking awareness sessions for PWDs in different schools and colleges in Georgia.

Contact details:-----

Representative Name and Contact:-----

Annexures: CV of core team, Organization Profile, Annual Reports, Financial statements.

Project Timeline- 18 months

	Activity	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
1	Staff Hiring	*																	
2	Staff Orientation		*																
3	Survey of the area			*	*														
4	Awareness Sessions				*														
5	Disability Screening					*	*	*											
6	Mapping schools					*	*	*											
7	Recommendations								*	*									
8	Training of teachers										*	*							
9	Awareness of children										*	*							
10	Stakeholder consultations									*		*							
11	Fostering partnerships		*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	
12	Networking with hospitals		*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	
13	Vocational training										*	*	*	*	*	*	*		
14	Organising events etc.					*				*				*					
15	Awareness sessions		*	*	*	*	*	*	*	*	*	*	*	*	*	*	*		
16	Health camps						*				*					*			
17	Distribution of medicines etc.						*				*					*			
18	Advocacy efforts with stakeholders				*	*	*	*	*	*	*	*	*	*	*	*	*		
19	Monitoring and evaluation	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*
20	Documentation/reporting	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*

Project Log Frame Matrix

Goal	Outcome		
Improve the status of children with disabilities in Georgia through community engagement.	Holistic development of Children with disabilities in Georgia.		
Objectives	Output	Indicators	Risk/ assumption
Objective 1. To develop systems for early identification and screening of children with disabilities in the Imereti Region of Georgia.	1. Process of early detection, prevention and screening of CWDs established.	Report published No and % of PWD % of disability prevalence	Parents provide honest information about children with disabilities.
Activities 1. Survey of the area 2. Awareness of teachers and parents 3. Disability Screening	1. Screening of children with disabilities conducted. 2. Situation analysis report on status of disability in project site. 3. Information on various issues and challenges of CWDs collected. 2. Screening of children	Area surveyed No. of school visited No. of CWD's No. of cases identified No. of health workers made aware	

	completed. 3. Early detection awareness given to parents.	No. of awareness sessions held No. of early detections made	
Objective 2. To promote inclusive education by developing a conducive school environment for the children with disabilities in over 50 schools in the project site.	1. CWD will have better access to the education system. 2. CWD's would be included in the mainstream education services. 3. Care, Attention and Quality of Education for CWDs improved.	No. of schools that participate in the project Percentage increase in CWDs enrollment	School Authorities are willing to bring the change and actively participate in the project.
Activities 1. Mapping the existing educational facility 2. Recommendations for developing a conducive environment for children 3. Training of teachers 4. Awareness of children	1. Detailed information on existing infrastructure for CWDs in different schools. 2. Improvement in infrastructure. 3. Students and teachers become aware about the needs of CWDs. 4. Improved behaviour of	No. of meetings held No. of CWD's enrolled in the school No. of learning skill provided to CWD's No. of schemes/provision	

	teachers and students to CWDs. 5. Learning skills of CWDs improved.	benefits provided to CWD's No. of teachers trained Feedback reports of CWDs in behaviour change of teachers and students.	
Objective 3. To improve the lives of children with disabilities through a community based rehabilitation program.	Strengthening community engagement for improving lives of CWDs.	Adoption of CBR strategy by the community. Linkages developed with existing schemes and programs.	Willingness of communities to support the project and help the CWDs. Political willingness
Activities 1. Stakeholder consultations 2. Fostering partnerships with local authorities and community 3. Networking with hospitals	1. Improved knowledge of community members on CBR. 2. Linkages developed with hospitals and clinics. 3. CWDs feel secure within	No. of meetings No. of stakeholder consultations No. of communities events	

and clinics 4. Vocational training for disabled youth 5. Organising community events etc. 6. Awareness sessions 7. Health camps 8. Distribution of necessary medicines, equipment for special children 9. Advocacy efforts with stakeholders	the community. 4. CWDs participate in community events. 5. Health camps organised and provide necessary therapies to CWDs. 6. Equipment provided to CWDs.	No. of health camps organised No. of equipments of distributed	
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Project Budget

Activity	Unit Cost	Number	Total
Staff Salary	-----	-----	---
Staff Orientation	-----	-----	---
Survey of the area	-----	-----	---
Awareness of health staff and parents	-----	-----	---
Disability Screening	-----	-----	---
Mapping the existing educational facility	-----	-----	---
Recommendations for developing a conducive environment for children	-----	-----	---
Training of teachers	-----	-----	---
Awareness of children	-----	-----	---
Stakeholder consultations	-----	-----	---
Fostering partnerships with local authorities and community	-----	-----	---
Networking with hospitals and clinics	-----	-----	---
Vocational training for disabled youth	-----	-----	-
Organising community events etc.	-----	-----	---
Awareness sessions	-----	-----	---
Health camps	-----	-----	-----

Distribution of necessary medicines, equipment for special children	-----	-----	----- ---
Advocacy efforts with stakeholders	-----	-----	----- ---
Monitoring and evaluation	-----	-----	----- ---
Documentation/reporting	-----	-----	----- ---
Grand Total			----- ---

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